| Fill in this information to identify your case: |                               |                               |
|---|-------------------------------|-------------------------------|
| United States Bankruptcy Court for the:         |                               |                               |
| EASTERN DISTRICT OF CALIFORNIA                  |                               |                               |
| Case number (if known)                          | Chapter you are filing under: |                               |
|   | ■ Chapter 7                   |                               |
|   | ☐ Chapter 11                  |                               |
|   | ☐ Chapter 12                  |                               |
|   | ☐ Chapter 13                  | ☐ Check if this amended filir |

### Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself   |  |   |
|-----|--|--|---|
|     |  | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):                     |
| 1.  | Your full name   |  |   |
|     | Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee. | Dane First name  William Middle name  Johnson Last name and Suffix (Sr., Jr., II, III) | First name  Middle name  Last name and Suffix (Sr., Jr., II, III) |
|     |  |  |   |
| 2.  | All other names you have used in the last 8 years  |  |   |
|     | Include your married or maiden names.  |  |   |
| 3.  | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)  | xxx-xx-2054  |   |

Debtor 1 Dane William Johnson

Case number (if known)

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |
|----|--|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs.  Business name(s)  EIN   | ☐ I have not used any business name or EINs.  Business name(s)  EIN  |
| 5. | Where you live   | 6116 Everest Way  | If Debtor 2 lives at a different address:  |
|    |  | Sacramento, CA 95817  Number, Street, City, State & ZIP Code  | Number, Street, City, State & ZIP Code   |
|    |  | Sacramento  |  |
|    |  | County  | County   |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|    |  | PO Box 5820<br>Sacramento, CA 95817   |  |
|    |  | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code   |
| 6. | Why you are choosing this district to file for bankruptcy  | Check one:  Over the last 180 days before filing this petition,   | Check one:  ☐ Over the last 180 days before filing this petition, I  |
|    |  | I have lived in this district longer than in any other district.  | have lived in this district longer than in any other district.   |
|    |  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)   |
|    |  |   |  |

| Deb  | tor 1 Dane William John   | nson              |   |  |  | Case number (if known)  |   |
|------|---|-------------------|---|--|--|---|---|
|      |   |                   |   |  |  |   |   |
| Part | Tell the Court About  | Your Bank         | ruptcy C                                  | ase  |  |   |   |
| 7.   | The chapter of the Bankruptcy Code you are  |                   |   |  | each, see <i>Notice Required</i> age 1 and check the appropri  | by 11 U.S.C. § 342(b) for Individuals I riate box.  | Filing for Bankruptcy                               |
|      | choosing to file under  | ■ Chapt           | er 7                                      |  |  |   |   |
|      |   | ☐ Chapt           | er 11                                     |  |  |   |   |
|      |   | ☐ Chapt           | er 12                                     |  |  |   |   |
|      |   | ☐ Chapt           | er 13                                     |  |  |   |   |
| 8.   | How you will pay the fee  | abo<br>ord<br>a p | out how your<br>er. If your<br>re-printed | ou may pay. Typica<br>attorney is submit<br>I address. | ally, if you are paying the fee<br>ting your payment on your b | neck with the clerk's office in your local yourself, you may pay with cash, cas behalf, your attorney may pay with a creation of the control | hier's check, or money<br>edit card or check with   |
|      |   | The               | ed to pa<br>Filing Fe                     | y tne tee in install<br>ee in Installments (           | I <b>ments.</b> If you choose this o<br>Official Form 103A).   | ption, sign and attach the Application  | for Individuals to Pay                              |
|      |   | but<br>app        | is not red<br>lies to yo                  | quired to, waive you<br>our family size and y          | ur fee, and may do so only if<br>you are unable to pay the fe  | otion only if you are filing for Chapter 7<br>f your income is less than 150% of the<br>le in installments). If you choose this o<br>Dfficial Form 103B) and file it with your  | official poverty line that ption, you must fill out |
|      |   |                   | тррпоан                                   | on to riave the one                                    | apier 77 ming 7 ce vvarved (e                                  | omolar i omi 1005, and me it was you  | poution.  |
| 9.   | Have you filed for bankruptcy within the  | ■ No.             |   |  |  |   |   |
|      | last 8 years?   | ☐ Yes.            | District                                  |  | NA/II. a. a  | 0   |   |
|      |   |                   | District                                  |  |  | Case number   |   |
|      |   |                   | District<br>District                      |  | When<br>When   | Case number<br>Case number  |   |
|      |   |                   | DISTRICT                                  |  | vviieii  | Case number   |   |
| 10.  | Are any bankruptcy cases pending or being   | ■ No              |   |  |  |   |   |
|      | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? | ☐ Yes.            |   |  |  |   |   |
|      |   |                   | Debtor                                    |  |  | Relationship to you   |   |
|      |   |                   | District                                  |  | When   | Case number, if know  | /n  |
|      |   |                   | Debtor                                    |  |  | Relationship to you   |   |
|      |   |                   | District                                  |  | When   | Case number, if know  | /n  |
| 11.  | Do you rent your residence?   | ■ No.             | Go to                                     | line 12.   |  |   |   |
|      | . Coldonioo   | ☐ Yes.            | Has y                                     | our landlord obtaine                                   | ed an eviction judgment aga                                    | ainst you?  |   |
|      |   |                   |   | No. Go to line 12.                                     |  |   |   |
|      |   |                   |   | Yes. Fill out <i>Initia</i> this bankruptcy p          |  | on Judgment Against You (Form 101A  | and file it as part of                              |
|      |   |                   |   |  |  |   |   |

| Deb                            | tor 1 Dane William Joh   | nson                 |   | Case number (if known)  |
|--------------------------------|--|----------------------|---|---|
|                                |  |                      |   |   |
| Part                           | Report About Any Bu  | usinesses            | You Own as a Sole Pr  | oprietor  |
| 12.                            | Are you a sole proprietor of any full- or part-time business?  | ■ No.                | Go to Part 4.   |   |
|                                | business:  | ☐ Yes.               | Name and location   | of business   |
|                                | A sole proprietorship is a   |                      |   |   |
|                                | business you operate as<br>an individual, and is not a<br>separate legal entity such<br>as a corporation,<br>partnership, or LLC.                            |                      | Name of business,   | if any  |
|                                | If you have more than one sole proprietorship, use a separate sheet and attach   |                      | Number, Street, Cit   | y, State & ZIP Code   |
|                                | it to this petition.   |                      | Check the appropri  | ate box to describe your business:  |
|                                |  |                      | ☐ Health Care   | Business (as defined in 11 U.S.C. § 101(27A))   |
|                                |  |                      | ☐ Single Asse   | t Real Estate (as defined in 11 U.S.C. § 101(51B))  |
|                                |  |                      | ☐ Stockbroker   | (as defined in 11 U.S.C. § 101(53A))  |
|                                |  |                      | ☐ Commodity   | Broker (as defined in 11 U.S.C. § 101(6))   |
|                                |  |                      | ☐ None of the   | above   |
| C<br>B<br>aı<br>de<br>de<br>11 | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code, and<br>are you a small business<br>debtor or a debtor as<br>defined by 11 U.S.C. §<br>1182(1)? | proceed<br>you are o | under Subchapter V so choosing to proceed und v statement, and federa | 1, the court must know whether you are a small business debtor or a debtor choosing to that it can set appropriate deadlines. If you indicate that you are a small business debtor or der Subchapter V, you must attach your most recent balance sheet, statement of operations, I income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. |
|                                | For a definition of small  | <b>—</b> NO.         | •   |   |
|                                | business debtor, see 11 U.S.C. § 101(51D).   | □ No.                | I am filing under Ch<br>Code.   | apter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy  |
|                                |  | ☐ Yes.               |   | apter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and proceed under Subchapter V of Chapter 11.  |
|                                |  | ☐ Yes.               |   | apter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I under Subchapter V of Chapter 11.  |
| Part                           | 4: Report if You Own or  | r Have Any           | / Hazardous Property  | or Any Property That Needs Immediate Attention  |
| 14.                            | Do you own or have any   | ■ No.                |   |   |
|                                | property that poses or is<br>alleged to pose a threat<br>of imminent and<br>identifiable hazard to   | ☐ Yes.               | What is the hazard?   |   |
|                                | public health or safety? Or do you own any property that needs immediate attention?  |                      | If immediate attention needed, why is it need                         |   |
|                                | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?  |                      | Where is the property   | ?   |
|                                | 5 <del></del>  |                      |   | Number, Street, City, State & Zip Code  |
|                                |  |                      |   |   |

Debtor 1 Dane William Johnson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Deb | otor 1 Dane William Joh   | nson                    |  | Case number (if   | known)   |
|-----|---|-------------------------|--|---|--|
| Par | t 6: Answer These Quest   | ions for Rep            | oorting Purposes   |   |  |
|     | What kind of debts do you have?   |                         | Are your debts primarily consulution of the consulution of the consulting the con | mer debts? Consumer debts are defined family, or household purpose."                      | in 11 U.S.C. § 101(8) as "incurred by an                                       |
|     |   | 1                       | ☐ No. Go to line 16b.  |   |  |
|     |   | I                       | Yes. Go to line 17.  |   |  |
|     |   |                         |  | ess debts? Business debts are debts that ent or through the operation of the busines      |  |
|     |   | I                       | ☐ No. Go to line 16c.  |   |  |
|     |   |                         | ☐ Yes. Go to line 17.  |   |  |
|     |   | 16c. S                  | State the type of debts you owe th   | nat are not consumer debts or business d  | ebts   |
| 17. | Are you filing under Chapter 7?   | □ No. I                 | am not filing under Chapter 7. G   | o to line 18.   |  |
|     | Do you estimate that<br>after any exempt<br>property is excluded and<br>administrative expenses | <b>—</b> 163.           | are paid that funds will be availab  | ou estimate that after any exempt property le to distribute to unsecured creditors?       | is excluded and administrative expenses  |
|     | are paid that funds will  |                         | No   |   |  |
|     | be available for distribution to unsecured creditors?   |                         | □Yes   |   |  |
| 18. | How many Creditors do   | <b>1</b> -49            |  | <b>1</b> ,000-5,000   | <b>2</b> 5,001-50,000  |
|     | you estimate that you owe?  | □ 50-99                 |  | ☐ 5001-10,000   | ☐ 50,001-100,000   |
|     |   | ☐ 100-199<br>☐ 200-999  |  | □ 10,001-25,000   | ☐ More than100,000   |
| 19. | How much do you   | <b>\$0 - \$50</b>       | 0.000  | ☐ \$1,000,001 - \$10 million  | □ \$500,000,001 - \$1 billion  |
|     | estimate your assets to<br>be worth?  | □ \$50,001              | - \$100,000  | □ \$10,000,001 - \$50 million   | □ \$1,000,000,001 - \$10 billion   |
|     |   |                         | 01 - \$500,000<br>01 - \$1 million   | □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million                            | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion                     |
|     |   | Δ ψοσο,στ               | , Trimion  |   |  |
| 20. | How much do you estimate your liabilities   | □ \$0 - \$50            |  | □ \$1,000,001 - \$10 million  | □ \$500,000,001 - \$1 billion  |
|     | to be?  |                         | 1 - \$100,000<br>01 - \$500,000  | □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million                              | □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion             |
|     |   |                         | 01 - \$1 million   | ☐ \$100,000,001 - \$500 million   | ☐ More than \$50 billion   |
| Par | t 7: Sign Below   |                         |  |   |  |
| For | you   | I have exa              | mined this petition, and I declare   | under penalty of perjury that the informati   | on provided is true and correct.   |
|     |   |                         |  | n aware that I may proceed, if eligible, und<br>available under each chapter, and I choos |  |
|     |   |                         |  | ay or agree to pay someone who is not ar ice required by 11 U.S.C. § 342(b).              | attorney to help me fill out this  |
|     |   | I request re            | elief in accordance with the chapte  | er of title 11, United States Code, specifie  | d in this petition.  |
|     |   | bankruptcy<br>and 3571. | case can result in fines up to \$25  | cealing property, or obtaining money or pr<br>50,000, or imprisonment for up to 20 year   | operty by fraud in connection with a s, or both. 18 U.S.C. §§ 152, 1341, 1519, |
|     |   |                         | William Johnson<br>liam Johnson  | Signature of Debtor 2   |  |
|     |   | Signature               |  | •   |  |
|     |   | Executed of             |  | Executed on   |  |
|     |   |                         | MM / DD / YYYY   | MM / D  | D / YYYY   |

| Debtor 1 Dane William Joh   | nson  | Cas                        | e number (if known)                    |              |
|---|---|----------------------------|--|--------------|
| For your attorney, if you are represented by one                                    | I, the attorney for the debtor(s) named in this punder Chapter 7, 11, 12, or 13 of title 11, Unite for which the person is eligible. I also certify the | ed States Code, and have e | explained the relief available under e | each chapter |
| If you are not represented by<br>an attorney, you do not need<br>to file this page. | and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.  |                            |  |              |
|   | /s/ Peter G. Macaluso   | Date                       | 7/26/2021                              |              |
|   | Signature of Attorney for Debtor  |                            | MM / DD / YYYY                         |              |
|   | Peter G. Macaluso 215730  |                            |  |              |
|   | Printed name  |                            |  |              |
|   | Law Office of Peter G. Macaluso   |                            |  |              |
|   | Firm name   |                            |  |              |
|   | 7230 South Land Park Drive #127   |                            |  |              |
|   | Sacramento, CA 95831  |                            |  |              |
|   | Number, Street, City, State & ZIP Code  |                            |  |              |
|   | Contact phone <b>916-392-6591</b>   | Email address              | info@pmbankruptcy.com                  |              |

215730 CA Bar number & State Certificate Number: 12459-CAE-CC-035737056



# **CERTIFICATE OF COUNSELING**

I CERTIFY that on June 7, 2021, at 11:30 o'clock AM PDT, Dane Johnson received from Abacus Credit Counseling, an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the Eastern District of California, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: June 7, 2021 By: /s/Alissa DeMarco

Name: Alissa DeMarco

Title: Credit Counselor

\* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. 109(h) and 521(b).

| mation to identify your | case:                          |                        |  |
|-------------------------|--------------------------------|------------------------|--|
| Dane William Joh        | nson                           |                        |  |
| First Name              | Middle Name                    | Last Name              |  |
|                         |                                |                        |  |
| First Name              | Middle Name                    | Last Name              |  |
| nkruptcy Court for the: | EASTERN DISTRICT C             | F CALIFORNIA           |  |
|                         |                                |                        |  |
|                         | Dane William Joh<br>First Name | First Name Middle Name | Dane William Johnson       First Name     Middle Name     Last Name       First Name     Middle Name     Last Name |

☐ Check if this is an amended filing

12/15

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

|     | mation. Fill out all of your schedules first; then complete the information on this form. If you are filing amendo<br>original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. | ed schedu   | ules after you file       |
|-----|---|-------------|---------------------------|
| Par | 1: Summarize Your Assets  |             |                           |
|     |   |             | assets<br>of what you own |
| 1.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B   | \$          | 0.00                      |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B  | \$          | 47,129.00                 |
|     | 1c. Copy line 63, Total of all property on Schedule A/B   | \$          | 47,129.00                 |
| Par | 2: Summarize Your Liabilities   |             |                           |
|     |   |             | iabilities<br>nt you owe  |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D                      | \$          | 66,591.00                 |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   | \$          | 0.00                      |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F   | \$          | 174,104.14                |
|     | Your total liabilities  | \$          | 240,695.14                |
| Par | 3: Summarize Your Income and Expenses   |             |                           |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I   | \$          | 4,748.00                  |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J   | \$          | 5,842.00                  |
| Par | 4: Answer These Questions for Administrative and Statistical Records  |             |                           |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you  | ur other so | chedules.                 |
| 7.  | ■ Yes What kind of debt do you have?  |             |                           |

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Debtor 1 Dane William Johnson

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_0.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total c | laim |
|--|---------|------|
| From Part 4 on Schedule E/F, copy the following:   |         |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$      | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$      | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$      | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$      | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$      | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$     | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$      | 0.00 |

| Debtor 1  | Dane William Jo   | hnson  |   |  |  |
|---|---|--|---|--|--|
|   | First Name  | Middle Name  | Last Name   |  |  |
| ebtor 2<br>pouse, if filing   | ) First Name  | Middle Name  | Last Name   |  |  |
|   |   | EASTERN DISTRICT OF  | CALIFORNIA  |  |  |
| ase numbe   |   |  |   |  | ☐ Check if this is a   |
| asc numbe   |   |  |   |  | ☐ Check if this is a amended filing  |
|   |   |  |   |  |  |
| official (  | Form 106A/B   |  |   |  |  |
| ched  | lule A/B: Prop  | perty  |   |  | 12/15  |
| nk it fits be   | st. Be as complete and accur<br>f more space is needed, attach  | ate as possible. If two married  | nce. If an asset fits in more than on the second are filing together, both and the top of any additional page.  | are equally responsible for su   | pplying correct  |
| art 1: Desc   | cribe Each Residence, Buildin   | g, Land, or Other Real Estate  | You Own or Have an Interest In  |  |  |
| Do you ow   | n or have any legal or equitab  | le interest in any residence, b  | uilding, land, or similar property?   | •  |  |
| ■ No. Go t  | o Part 2.   |  |   |  |  |
| ☐ Yes. Wh   | nere is the property?   |  |   |  |  |
|   |   |  |   |  |  |
| art 2: Desc   | cribe Your Vehicles   |  |   |  |  |
|   |   |  |   |  |  |
| omeone els  | e drives. If you lease a vehic  | cle, also report it on <i>Schedul</i>  | icles, whether they are regist<br>le G: Executory Contracts and U   |  | ehicles you own that   |
| meone els   | e drives. If you lease a vehic  |  | le G: Executory Contracts and U   | Jnexpired Leases.  | ·  |
| Cars, van  No Yes   | e drives. If you lease a vehicles, trucks, tractors, sport u  | cle, also report it on <i>Schedul</i>  | le G: Executory Contracts and U   | Do not deduct secured clube amount of any secure   | aims or exemptions. Put  |
| Cars, van  No Yes  3.1 Make:  | Dodge Challenger  | who has an intere  | le G: Executory Contracts and U   | Unexpired Leases.  Do not deduct secured cl  | aims or exemptions. Put  |
| Cars, van  No Yes  3.1 Make:  Model Year:   | Dodge Challenger 2015   | Who has an intered Debtor 1 only   | le G: Executory Contracts and Uses  | Do not deduct secured cl<br>the amount of any secure<br>Creditors Who Have Clair   | aims or exemptions. Put id claims on Schedule D: ms Secured by Property.  Current value of the   |
| Cars, van  No Yes  3.1 Make:  Model Year: Appro   | Dodge Challenger 2015   | Who has an intereduced Debtor 1 only Debtor 2 only Debtor 1 and Debtor | le G: Executory Contracts and less set in the property? Check one lebtor 2 only   | Do not deduct secured cl<br>the amount of any secure<br>Creditors Who Have Clair   | aims or exemptions. Put<br>ed claims on <i>Schedule D:</i><br>ms Secured by Property.  |
| Cars, van  No Yes  3.1 Make: Model Year: Appro Other  | Dodge Challenger 2015  Character mileage:   | Who has an intereduced Debtor 1 only Debtor 2 only At least one of t   | le G: Executory Contracts and Uses  | Do not deduct secured cl<br>the amount of any secure<br>Creditors Who Have Clair   | aims or exemptions. Put id claims on Schedule D: ms Secured by Property.  Current value of the   |
| Cars, van  No Yes  3.1 Make:  Model Year: Appro Other   | Dodge Challenger 2015  ximate mileage: information:   | Who has an intereduced Debtor 1 only Debtor 2 only At least one of t   | le G: Executory Contracts and le s  est in the property? Check one  ebtor 2 only the debtors and another  | Do not deduct secured cl<br>the amount of any secure<br>Creditors Who Have Clair<br>Current value of the<br>entire property?   | aims or exemptions. Put ed claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  |
| Cars, van  No Yes  3.1 Make: Model Year: Appro Other  good  | Dodge Challenger 2015  ximate mileage: information:   | Who has an intereduced by tilitity vehicles, motorcycles who has an intereduced by the property of the propert | le G: Executory Contracts and le s  est in the property? Check one  ebtor 2 only the debtors and another  | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$25,159.00   | aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$25,159.00   |
| Cars, van  No Yes  3.1 Make: Model Year: Appro Other  good  | Dodge Challenger 2015 ximate mileage: information: I condition  Kia   | Who has an intereduced by tilitity vehicles, motorcycles who has an intereduced by the property of the propert | le G: Executory Contracts and le s  est in the property? Check one  ebtor 2 only the debtors and another  s community property  | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$25,159.00  | aims or exemptions. Put and claims on Schedule D: and Secured by Property.  Current value of the portion you own?  \$25,159.00   |
| Cars, van  Cars, van  No Yes  3.1 Make: Model Year: Appro Other  good  3.2 Make:                            | Dodge Challenger 2015 ximate mileage: information: I condition  Kia   | Who has an intered before 2 only B200 Debtor 1 and Debtor 1 and Debtor 2 only Check if this is (see instructions)  Who has an intered before 2 only Debtor 3 and Debtor 4 and Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 and Debtor 7 and Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 and Debtor 1 only Debtor 1 and Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 1 only  | le G: Executory Contracts and le s  est in the property? Check one  ebtor 2 only the debtors and another  s community property  | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$25,159.00  Do not deduct secured of the amount of any secure Creditors Who Have Clair  | aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$25,159.00  aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.   |
| Cars, van  No Yes  3.1 Make: Model Year: Appro Other Good  3.2 Make: Model Year:                            | Dodge Challenger 2015 ximate mileage: information: I condition  Kia Telluride   | Who has an intered between the property of the | s  est in the property? Check one ebtor 2 only the debtors and another community property est in the property? Check one  | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$25,159.00  Do not deduct secured of the amount of any secure   | aims or exemptions. Put and claims on Schedule D: and Secured by Property.  Current value of the portion you own?  \$25,159.00   |
| Cars, van  No Yes  3.1 Make: Model Year: Appro Other  Good  3.2 Make: Model Year: Appro                     | Dodge Challenger 2015 ximate mileage: information: I condition  Kia Telluride 2020  | Who has an interest Debtor 1 only Debtor 1 and Descriptions (see instructions)  Who has an interest Debtor 2 only Debtor 1 and Description Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 and De | s  est in the property? Check one ebtor 2 only the debtors and another community property est in the property? Check one  | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$25,159.00  Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the                               | aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$25,159.00  aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.  Current value of the                   |
| Cars, van  No Yes  3.1 Make: Model Year: Appro Other Good  3.2 Make: Model Year: Appro Other                | Dodge Challenger 2015  ximate mileage: information: I condition  Kia Telluride 2020  ximate mileage:                        | Who has an interes  Debtor 1 and Debtor 1 and Debtor 1 only Check if this is (see instructions)  Who has an interes Debtor 2 only Debtor 2 only Debtor 3 and Debtor 1 only Check if this is (see instructions)  Who has an interes Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and Debtor 4 and Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 3 only Check if this is  | le G: Executory Contracts and le s  est in the property? Check one  ebtor 2 only the debtors and another  community property  est in the property? Check one                    | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$25,159.00  Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the                               | aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$25,159.00  aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.  Current value of the                   |
| Cars, van  No Yes  3.1 Make: Model Year: Appro Other Good  3.2 Make: Model Year: Appro Other                | Dodge Challenger 2015  ximate mileage: information:  Kia Telluride 2020  ximate mileage: information:                       | Who has an interest Debtor 1 and Debtor 1 only Check if this is (see instructions)  Who has an interest Debtor 1 and Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 1 only Debtor 1 and Debtor 1 a | s  est in the property? Check one ebtor 2 only the debtors and another community property est in the property? Check one ebtor 2 only the debtors and another                   | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$25,159.00  Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?              | aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$25,159.00  aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  |
| Cars, van  No Yes  3.1 Make: Model Year: Appro Other Good  3.2 Make: Model Year: Appro Other                | Dodge Challenger 2015  ximate mileage: information:  Kia Telluride 2020  ximate mileage: information:                       | Who has an interes  Debtor 1 and Debtor 1 and Debtor 1 only Check if this is (see instructions)  Who has an interes Debtor 2 only Debtor 2 only Debtor 3 and Debtor 1 only Check if this is (see instructions)  Who has an interes Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and Debtor 4 and Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 3 only Check if this is  | s  est in the property? Check one ebtor 2 only the debtors and another community property est in the property? Check one ebtor 2 only the debtors and another                   | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$25,159.00  Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?              | aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$25,159.00  aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  |
| Cars, van  No Yes  3.1 Make: Model Year: Appro Other Good  3.2 Make: Model Year: Appro Other Good           | Dodge Challenger 2015  ximate mileage: information:  Kia Telluride 2020  ximate mileage: information: I condition           | Who has an interes Debtor 1 and Debtor 1 only Check if this is (see instructions)  Who has an interes Debtor 2 only Debtor 1 and Debtor 1 only Debtor 1 only Check if this is (see instructions)   | s  est in the property? Check one ebtor 2 only the debtors and another community property est in the property? Check one ebtor 2 only the debtors and another                   | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$25,159.00  Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$20,000.00 | aims or exemptions. Put tel claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$25,159.0  aims or exemptions. Put tel claims on Schedule D: ms Secured by Property.  Current value of the portion you own? |
| Cars, van  No Yes  3.1 Make: Model Year: Appro Other Good  3.2 Make: Model Year: Appro Other Good  Watercra | Dodge Challenger 2015 ximate mileage: information: I condition  Kia Telluride 2020 ximate mileage: information: I condition | Who has an intered between the property of the control of the cont | s set in the property? Check one ebtor 2 only he debtors and another community property  est in the property? Check one ebtor 2 only he debtors and another community property. | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$25,159.00  Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$20,000.00 | aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$25,159.0  aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.  Current value of the portion you own?   |

| Debtor 1                        | Dane William Johnson  | Case number (if known)                         |   |
|---------------------------------|---|--|---|
|                                 | he dollar value of the portion you own for all of your entries from F<br>s you have attached for Part 2. Write that number here                       |  | \$45,159.00   |
| Part 2: D                       | Describe Your Personal and Household Items  |  |   |
|                                 | own or have any legal or equitable interest in any of the following i   | items?   | Current value of the portion you own? Do not deduct secured |
| <i>Exam<sub>l</sub></i><br>□ No | chold goods and furnishings ples: Major appliances, furniture, linens, china, kitchenware s. Describe   |  | claims or exemptions.                                       |
|                                 | Furniture   |  | \$250.00  |
|                                 | Appliances  |  | \$100.00  |
|                                 | Kitchen Items   |  | \$100.00  |
|                                 | Knick-Knacks  |  | \$50.00   |
|                                 | Outdoor Items   |  | \$200.00  |
|                                 | Pictures  |  | \$10.00   |
|                                 | Books   |  | \$10.00   |
| □ No                            | pnics ples: Televisions and radios; audio, video, stereo, and digital equipmen including cell phones, cameras, media players, games s. Describe       | nt; computers, printers, scanners; music col   | lections; electronic devices                                |
|                                 | Electronic equipment  |  | \$200.00  |
| Exam <sub>l</sub> ■ No          | tibles of value  ples: Antiques and figurines; paintings, prints, or other artwork; books, pother collections, memorabilia, collectibles  s. Describe | pictures, or other art objects; stamp, coin, c | or baseball card collections;                               |
| Exam <sub>i</sub><br>■ No       | ment for sports and hobbies  ples: Sports, photographic, exercise, and other hobby equipment; bicyc musical instruments  s. Describe                  | cles, pool tables, golf clubs, skis; canoes ar | nd kayaks; carpentry tools;                                 |
| 10. <b>Firea</b><br>Exan        |   |  |   |
| 11. <b>Cloth</b> Exan           | nes  mples: Everyday clothes, furs, leather coats, designer wear, shoes, acco   | essories                                       |   |

| Debtor 1 Dane   | William Johnson   | Case no  | umber (if known)    |   |
|---|---|--|---------------------|---|
| Yes. Describe   | <b>9</b>  |  |                     |   |
|   | Clothing  |  |                     | \$500.00  |
| 12. <b>Jewelry</b> Examples: Ever  ■ No □ Yes. Describe |   | gement rings, wedding rings, heirloom jewelry, w   | vatches, gems, gold | , silver  |
| 13. Non-farm anima  Examples: Dogs ■ No □ Yes. Describe | s, cats, birds, horses  |  |                     |   |
| ■ No  | onal and household items you did  | not already list, including any health aids yo   | u did not list      |   |
|   | r value of all of your entries from P<br>ite that number here             | art 3, including any entries for pages you ha  | ve attached         | \$1,420.00  |
| Part 4: Describe You                                    | ur Financial Assets   |  |                     |   |
| Do you own or hav                                       | e any legal or equitable interest in                                      | any of the following?  |                     | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| □ No ■ Yes  |   |  | sh                  | \$300.00  |
| insti   |   | ounts; certificates of deposit; shares in credit uni-  | ons, brokerage hou  | ses, and other similar  |
| □ No<br>■ Yes   |   | Institution name:  |                     |   |
| <b>—</b> 165  |   | JP Morgan Chase Bank, N.A.<br>PO Box 182051<br>Columbus, OH 43218-2051   |                     |   |
|   | 17.1. Checking  | Acct. #9570  |                     | \$250.00  |
| Examples: Bond  | funds, or publicly traded stocks<br>d funds, investment accounts with bro | okerage firms, money market accounts   |                     |   |
| ■ No<br>□ Yes   | Institution or issuer   | name:  |                     |   |
| joint venture   | aded stock and interests in incorp  | prated and unincorporated businesses, inclu  | ding an interest in | an LLC, partnership, and  |
| ■ No<br>□ Yes Give spe                                  | ecific information about them   |  |                     |   |
| 103. Give spe   | Name of entity:   |  | wnership:           |   |
| Negotiable instr<br>Non-negotiable<br>■ No              | ruments include personal checks, cas                                      | stiable and non-negotiable instruments shiers' checks, promissory notes, and money orcursfer to someone by signing or delivering them. |                     |   |

| De  | ebtor 1          | Dane Willi                                      | am Johnson  |  | Case number (if known)   |   |
|-----|------------------|---|---|--|--|---|
|     |                  |   | Issuer name:  |  |  |   |
| 21. |                  |   | <b>on accounts</b><br>in IRA, ERISA, Keogh, 401                           | (k), 403(b), thrift savings ac                           | counts, or other pension or profit-sharing                                 | plans   |
|     | ☐ Yes. L         | _ist each acco                                  | ount separately.  Type of account:  | Institution name   | e:   |   |
| 22. | Your sh<br>Examp | nare of all unu                                 |   |  | e service or use from a company<br>, gas, water), telecommunications compa | nies, or others   |
|     | ■ No<br>□ Yes    |   |   | Institution name   | e or individual:   |   |
| 23. |                  | es (A contrac                                   | t for a periodic payment of   | money to you, either for life                            | or for a number of years)  |   |
|     | ■ No<br>□ Yes    |   | Issuer name and descripti   | on.  |  |   |
| 24. | 26 U.S.C         |   | ation IRA, in an account in ), 529A(b), and 529(b)(1).                    | n a qualified ABLE progra                                | m, or under a qualified state tuition pro                                  | ogram.  |
|     | ■ No<br>□ Yes    |   | Institution name and desc   | ription. Separately file the re                          | ecords of any interests.11 U.S.C. § 521(c)                                 | :   |
| 25. | Trusts, ■ No     | equitable or                                    | future interests in proper  | rty (other than anything li                              | sted in line 1), and rights or powers ex                                   | ercisable for your benefit  |
|     |                  | Give specific                                   | information about them  |  |  |   |
| 26. | Examp. ■ No      | les: Internet d                                 | lomain names, websites, pi  | ts, and other intellectual proceeds from royalties and l |  |   |
| 27  |                  | •   | information about them s, and other general intar                         | ngibles  |  |   |
| 21. |                  |   |   |  | ldings, liquor licenses, professional licens                               | ses   |
|     | ☐ Yes.           | Give specific                                   | information about them  |  |  |   |
| M   | oney or p        | oroperty owe                                    | d to you?   |  |  | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | _                | unds owed to                                    | o you   |  |  |   |
|     | ■ No<br>□ Yes. 0 | Give specific i                                 | nformation about them, inc  | luding whether you already                               | filed the returns and the tax years  |   |
| 29. | _ ′              |   | or lump sum alimony, spou   | ısal support, child support,                             | maintenance, divorce settlement, property                                  | v settlement  |
|     | ■ No<br>□ Yes. 0 | Give specific i                                 | nformation  |  |  |   |
| 30. | Examp            | <i>les:</i> Unpaid w                            | eone owes you<br>ages, disability insurance p<br>unpaid loans you made to |  | s, sick pay, vacation pay, workers' compe                                  | nsation, Social Security  |
|     | ■ No<br>□ Yes.   | Give specific                                   | information   |  |  |   |
| 31. |                  | t <b>s in insuran</b><br><i>les:</i> Health, di |   | ealth savings account (HS/                               | N); credit, homeowner's, or renter's insura                                | nce   |
|     |                  | Name the insu                                   | urance company of each po<br>Company name:                                | olicy and list its value.                                | Beneficiary:   | Surrender or refund value:  |

| Debtor 1                  | Dane William Johnson  | Case number (if known)             |                       |
|---------------------------|---|------------------------------------|-----------------------|
| If you a someo            | terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy one has died.  Give specific information | , or are currently entitled to rec | eive property because |
| Exam <sub>i</sub><br>■ No | against third parties, whether or not you have filed a lawsuit or made a doles: Accidents, employment disputes, insurance claims, or rights to sue  Describe each claim                   | emand for payment                  |                       |
| ■ No □ Yes.  35. Any fin  | contingent and unliquidated claims of every nature, including counterclain  Describe each claim  nancial assets you did not already list  | ms of the debtor and rights to     | o set off claims      |
| 36. Add t                 | Give specific information  he dollar value of all of your entries from Part 4, including any entries for art 4. Write that number here  |                                    | \$550.00              |
| 37. <b>Do you o</b>       | own or have any legal or equitable interest in any business-related property?   |                                    |                       |
|                           | scribe Any Farm- and Commercial Fishing-Related Property You Own or Have an Info<br>ou own or have an interest in farmland, list it in Part 1.  | erest In.                          |                       |
| No.                       | own or have any legal or equitable interest in any farm- or commercial fis<br>Go to Part 7.<br>. Go to line 47.   | shing-related property?            |                       |
| Part 7:                   | Describe All Property You Own or Have an Interest in That You Did Not List Above  | 9                                  |                       |
| <i>Exam</i> µ<br>■ No     | have other property of any kind you did not already list?  oles: Season tickets, country club membership  Give specific information   |                                    |                       |
| 54. Add t                 | he dollar value of all of your entries from Part 7. Write that number here.   |                                    | \$0.00                |

Debtor 1 Case number (if known) **Dane William Johnson** List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 ..... \$0.00 56. Part 2: Total vehicles, line 5 \$45,159.00 57. Part 3: Total personal and household items, line 15 \$1,420.00 58. Part 4: Total financial assets, line 36 \$550.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$47,129.00 Copy personal property total 62. \$47,129.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$47,129.00

| Debtor 1                  | Dane William Joh         | nson               |               |                                    |
|---------------------------|--------------------------|--------------------|---------------|------------------------------------|
|                           | First Name               | Middle Name        | Last Name     |                                    |
| Debtor 2                  |                          |                    |               |                                    |
| (Spouse if, filing)       | First Name               | Middle Name        | Last Name     |                                    |
|                           | ankruptcy Court for the: | EASTERN DISTRICT C | DF CALIFORNIA |                                    |
| Case number<br>(if known) |                          |                    |               | Check if this is an amended filing |

### Jiliciai Folili 1000

# Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify the | Property Y | ou Claim | as Exempt |
|---------|--------------|------------|----------|-----------|
|---------|--------------|------------|----------|-----------|

| 1. | Which set of exemptions are you claiming | ? Check one only, | even if your | r spouse is filing v | vith you. |
|----|--|-------------------|--------------|----------------------|-----------|
|----|--|-------------------|--------------|----------------------|-----------|

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Schedule A/B that lists this property     | Current value of the portion you own | Amount of the exemption you claim                                 | Specific laws that allow exemption |
|---|--------------------------------------|---|------------------------------------|
|   | Copy the value from<br>Schedule A/B  | Check only one box for each exemption.                            |                                    |
| Furniture Line from Schedule A/B: 6.1     | \$250.00                             | \$250.00  | C.C.P. § 703.140(b)(3)             |
| Line IIIIII Schedule A/B. V. I            |                                      | 100% of fair market value, up to any applicable statutory limit   |                                    |
| Appliances Line from Schedule A/B: 6.2    | \$100.00                             | \$100.00  | C.C.P. § 703.140(b)(3)             |
| Ellie IIolii Goliodale 74 B. G.Z          |                                      | ☐ 100% of fair market value, up to any applicable statutory limit |                                    |
| Kitchen Items Line from Schedule A/B: 6.3 | \$100.00                             | <b>\$100.00</b>   | C.C.P. § 703.140(b)(3)             |
| Ellie Holli Goricadie 74 B. 4.4           |                                      | ☐ 100% of fair market value, up to any applicable statutory limit |                                    |
| Knick-Knacks Line from Schedule A/B: 6.4  | \$50.00                              | \$50.00   | C.C.P. § 703.140(b)(3)             |
| Line from Goriedale PAB. G.4              |                                      | ☐ 100% of fair market value, up to any applicable statutory limit |                                    |
| Outdoor Items Line from Schedule A/B: 6.5 | \$200.00                             | \$200.00  | C.C.P. § 703.140(b)(3)             |
| Ellio Holli Golloddio AVE. G.G            |                                      | ☐ 100% of fair market value, up to any applicable statutory limit |                                    |

| Debtor 1 Dane William Johnson |  |                                      |         | Case number (if known)  |                                    |  |  |
|-------------------------------|--|--------------------------------------|---------|---|------------------------------------|--|--|
| Br<br>Sc                      | ief description of the property and line on chedule A/B that lists this property         | Current value of the portion you own | Am      | ount of the exemption you claim                                 | Specific laws that allow exemption |  |  |
|                               |  | Copy the value from<br>Schedule A/B  | Che     | eck only one box for each exemption.                            |                                    |  |  |
|                               | ctures<br>ne from <i>Schedule A/B</i> : <b>6.6</b>                                       | \$10.00                              |         | \$10.00   | C.C.P. § 703.140(b)(3)             |  |  |
|                               |  |                                      |         | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |
|                               | poks<br>ne from <i>Schedule A/B</i> : <b>6.7</b>   | \$10.00                              | -       | \$10.00   | C.C.P. § 703.140(b)(3)             |  |  |
|                               |  |                                      |         | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |
|                               | ectronic equipment   | \$200.00                             | •       | \$200.00  | C.C.P. § 703.140(b)(3)             |  |  |
|                               | 10 110.111 00/1000/10/10/10  |                                      |         | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |
|                               | othing<br>ne from <i>Schedule A/B</i> : <b>11.1</b>                                      | \$500.00                             |         | \$500.00  | C.C.P. § 703.140(b)(3)             |  |  |
| Σ.,                           | io iidiii Gonedale / v Z. TTT  |                                      |         | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |
| •                             | ash<br>ne from <i>Schedule A/B</i> : <b>16.1</b>   | \$300.00                             |         | \$300.00  | C.C.P. § 703.140(b)(5)             |  |  |
|                               |  |                                      |         | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |
|                               | hecking: JP Morgan Chase Bank,<br>A.   | \$250.00                             |         | \$250.00  | C.C.P. § 703.140(b)(5)             |  |  |
| P(<br>Co<br>Ac                | D Box 182051  blumbus, OH 43218-2051  cct. #9570  ne from Schedule A/B: 17.1             |                                      |         | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |
| LII                           | le IIOIII Scriedule A/B. 17.1  |                                      |         |   |                                    |  |  |
|                               | re you claiming a homestead exemption<br>ubject to adjustment on 4/01/22 and every<br>No |                                      |         | iled on or after the date of adjustmen                          | nt.)                               |  |  |
| _                             |  | ed by the exemption wi               | ithin 1 | ,215 days before you filed this case                            | ?                                  |  |  |
|                               | □ No   |                                      |         |   |                                    |  |  |
|                               | ☐ Yes  |                                      |         |   |                                    |  |  |

| Fill in this informa  |  |   |  |  |                    |
|---|--|---|--|--|--------------------|
| Debtor 1  | Dane William Jo  | Ohnson  Middle Name  Last Name  |  | _  |                    |
| Debtor 2  | Filst Name   | Middle Name Last Name   |  |  |                    |
| (Spouse if, filing)   | First Name   | Middle Name Last Name   |  | -  |                    |
| United States Bankı   | ruptcy Court for the   | EASTERN DISTRICT OF CALIFORNIA  |  | _  |                    |
| Case number   |  |   |  |  |                    |
| (if known)  |  |   |  |  | if this is an      |
|   |  |   |  | ameno  | led filing         |
| Official Form   | 106D   |   |  |  |                    |
|   |  | Who Hove Claims Secured   | l by Droport   | 24   | 40/45              |
| schedule D  | : Creditors  | Who Have Claims Secured   | by Propert   | . <b>y</b>   | 12/15              |
|   |  | If two married people are filing together, both are equout, number the entries, and attach it to this form. On  |  |  |                    |
| . Do any creditors ha   | wa claime sacurad b  | v vour property?  |  |  |                    |
| . Do any creditors na   |  |   |  |  |                    |
| □ No. Chook th  |  |   | nu hava nathing alaa t   | to roport on this form                                 |                    |
| _   | nis box and submit t   | his form to the court with your other schedules. Yo   | ou have nothing else   | to report on this form.                                |                    |
| _   |  | his form to the court with your other schedules. Yo   | ou have nothing else   | to report on this form.                                |                    |
| Yes. Fill in al   | nis box and submit t   | his form to the court with your other schedules. Yo   |  |  |                    |
| Yes. Fill in al  Part 1: List All S  2. List all secured cla  | nis box and submit to the information secured Claims aims. If a creditor has   | his form to the court with your other schedules. You below.   | Column A   | Column B   | Column C           |
| Yes. Fill in al  Part 1: List All S  2. List all secured cla for each claim. If more  | nis box and submit to the information secured Claims aims. If a creditor has the than one creditor has   | below.  more than one secured claim, list the creditor separately a particular claim, list the orditors in Part 2. As   |  | Column B  Value of collateral                          | Column C Unsecured |
| Yes. Fill in all  Part 1: List All S  2. List all secured cla for each claim. If more much as possible, list  | nis box and submit to the information secured Claims sims. If a creditor has the claims in alphabetic sims in alphabetic simple simpl | his form to the court with your other schedules. You below.  more than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.   | Column A  Amount of claim Do not deduct the value of collateral.             | Column B  Value of collateral that supports this claim | Unsecured portion  |
| Yes. Fill in all  Part 1: List All S  2. List all secured cla for each claim. If more much as possible, list of  2.1 Citizens Bal   | nis box and submit to the information secured Claims sims. If a creditor has the claims in alphabetic sims in alphabetic simple simpl | his form to the court with your other schedules. You below.  more than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  | Column A  Amount of claim Do not deduct the                                  | Column B  Value of collateral that supports this       | Unsecured portion  |
| Yes. Fill in all  Part 1: List All S  2. List all secured cla for each claim. If more much as possible, list to  2.1 Citizens Ball  Creditor's Name   | nis box and submit to<br>ill of the information<br>Secured Claims<br>sims. If a creditor has<br>the than one creditor has<br>the claims in alphabeti   | his form to the court with your other schedules. You below.  more than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.   | Column A  Amount of claim Do not deduct the value of collateral.             | Column B  Value of collateral that supports this claim | Unsecured portion  |
| Yes. Fill in all  Part 1: List All S  2. List all secured cla for each claim. If more much as possible, list of  2.1 Citizens Bal   | nis box and submit to the information of the information of the information of the claims. If a creditor has the claims in alphabetion the claims in alphabetic th | his form to the court with your other schedules. You below.  more than one secured claim, list the creditor separately is a particular claim, list the other creditors in Part 2. As callorder according to the creditor's name.  Describe the property that secures the claim:  2015 Dodge Challenger 8200 miles good condition  As of the date you file, the claim is: Check all that   | Column A  Amount of claim Do not deduct the value of collateral.             | Column B  Value of collateral that supports this claim | Unsecured portion  |
| Yes. Fill in all  Part 1: List All S  2. List all secured cla for each claim. If more much as possible, list to  2.1 Citizens Ball Creditor's Name  Attention: R  | nis box and submit to the information secured Claims sims. If a creditor has the claims in alphabetionk  COP-15B  Orive  | his form to the court with your other schedules. You below.  more than one secured claim, list the creditor separately is a particular claim, list the other creditors in Part 2. As call order according to the creditor's name.  Describe the property that secures the claim:  2015 Dodge Challenger 8200 miles good condition  As of the date you file, the claim is: Check all that apply.   | Column A  Amount of claim Do not deduct the value of collateral.             | Column B  Value of collateral that supports this claim | Unsecured portion  |
| Yes. Fill in al  Part 1: List All S  2. List all secured cla for each claim. If more much as possible, list to  2.1 Citizens Bal Creditor's Name  Attention: R 1 Citizens D Riverside, R  | nis box and submit to the information secured Claims sims. If a creditor has the claims in alphabetionk  COP-15B  Orive  | his form to the court with your other schedules. You below.  more than one secured claim, list the creditor separately is a particular claim, list the other creditors in Part 2. As callorder according to the creditor's name.  Describe the property that secures the claim:  2015 Dodge Challenger 8200 miles good condition  As of the date you file, the claim is: Check all that   | Column A  Amount of claim Do not deduct the value of collateral.             | Column B  Value of collateral that supports this claim | Unsecured portion  |
| Yes. Fill in al  Part 1: List All S  2. List all secured cla for each claim. If more much as possible, list to  2.1 Citizens Bal Creditor's Name  Attention: R 1 Citizens D Riverside, R  | nis box and submit to the information secured Claims aims. If a creditor has the claims in alphabetionk  ROP-15B  Brive RI 02940   | his form to the court with your other schedules. You below.  more than one secured claim, list the creditor separately is a particular claim, list the other creditors in Part 2. As callorder according to the creditor's name.  Describe the property that secures the claim:  2015 Dodge Challenger 8200 miles good condition  As of the date you file, the claim is: Check all that apply.  Contingent  | Column A  Amount of claim Do not deduct the value of collateral.             | Column B  Value of collateral that supports this claim | Unsecured portion  |
| Yes. Fill in al  Part 1: List All S  2. List all secured cla for each claim. If more much as possible, list to  2.1 Citizens Bal Creditor's Name  Attention: R 1 Citizens D Riverside, R  | nis box and submit to the information secured Claims aims. If a creditor has the claims in alphabetink  ROP-15B  Orive RI 02940  ty, State & Zip Code  | his form to the court with your other schedules. You below.  more than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2015 Dodge Challenger 8200 miles good condition  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated  | Column A  Amount of claim Do not deduct the value of collateral.             | Column B  Value of collateral that supports this claim | Unsecured portion  |
| Yes. Fill in all  Part 1: List All S  2. List all secured cla for each claim. If more much as possible, list to  2.1 Citizens Bal Creditor's Name  Attention: R 1 Citizens D Riverside, R  Number, Street, Cit  | nis box and submit to the information secured Claims aims. If a creditor has the claims in alphabetink  ROP-15B  Orive RI 02940  ty, State & Zip Code  | his form to the court with your other schedules. You below.  more than one secured claim, list the creditor separately is a particular claim, list the other creditors in Part 2. As callorder according to the creditor's name.  Describe the property that secures the claim:  2015 Dodge Challenger 8200 miles good condition  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  | Column A  Amount of claim Do not deduct the value of collateral. \$35,227.00 | Column B  Value of collateral that supports this claim | Unsecured portion  |
| Yes. Fill in all  Part 1: List All S  2. List all secured cla for each claim. If more much as possible, list to  2.1 Citizens Bar Creditor's Name  Attention: R 1 Citizens D Riverside, R  Number, Street, Ci  Who owes the debt  | nis box and submit to the information secured Claims aims. If a creditor has the claims in alphabetink  ROP-15B  Orive RI 02940  ty, State & Zip Code  | below.  more than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2015 Dodge Challenger 8200 miles good condition  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  | Column A  Amount of claim Do not deduct the value of collateral. \$35,227.00 | Column B  Value of collateral that supports this claim | Unsecured portion  |
| Yes. Fill in all  Part 1: List All S  2. List all secured cla for each claim. If more much as possible, list to  2.1 Citizens Ball Creditor's Name  Attention: R 1 Citizens D Riverside, R  Number, Street, Ci  Who owes the debt'  Debtor 1 only                                   | nis box and submit to the information of the information of the information of the claims. If a creditor has the claims in alphabetion of the claims in alphabeti | his form to the court with your other schedules. You below.  more than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2015 Dodge Challenger 8200 miles good condition  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or sections)       | Column A  Amount of claim Do not deduct the value of collateral. \$35,227.00 | Column B  Value of collateral that supports this claim | Unsecured portion  |
| Yes. Fill in al  Part 1: List All S  2. List all secured cla for each claim. If more much as possible, list to  2.1 Citizens Bal Creditor's Name  Attention: R 1 Citizens D Riverside, R  Number, Street, Ci  Who owes the debt  Debtor 1 only Debtor 2 only                        | nis box and submit to the information of the information of the information of the claims. If a creditor has the claims in alphabetion of the claims in alphabeti | below.  more than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2015 Dodge Challenger 8200 miles good condition  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or sector car loan)   | Column A  Amount of claim Do not deduct the value of collateral. \$35,227.00 | Column B  Value of collateral that supports this claim | Unsecured portion  |
| Yes. Fill in all  Part 1: List All S  2. List all secured cla for each claim. If more much as possible, list to  2.1 Citizens Bar Creditor's Name  Attention: R 1 Citizens D Riverside, R  Number, Street, Ci  Who owes the debt  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor | nis box and submit to all of the information of the information of the information of the claims. If a creditor has the claims in alphabetion of the claims in al | below.  more than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2015 Dodge Challenger 8200 miles good condition  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or sector car loan)  Statutory lien (such as tax lien, mechanic's lien) | Column A  Amount of claim Do not deduct the value of collateral. \$35,227.00 | Column B  Value of collateral that supports this claim | Unsecured portion  |

9107

Last 4 digits of account number

**Last Active** 

Date debt was incurred 6/16/21

| Debtor 1 Dane William Johnson                                      |  | Case number (if known) |                |             |
|--|--|------------------------|----------------|-------------|
| First Name Middle N  | lame Last Name   | _                      |                |             |
| 2.2 Kia Motors Finance   | Describe the property that secures the claim:                            | \$31,364.00            | \$20,000.00    | \$11,364.00 |
| Creditor's Name  | 2020 Kia Telluride<br>good condition                                     |                        |                |             |
| 10550 Talbert Ave<br>Fountain Valley, CA<br>92708                  | As of the date you file, the claim is: Check all that apply.  Contingent |                        |                |             |
| Number, Street, City, State & Zip Code                             | ☐ Unliquidated ☐ Disputed  |                        |                |             |
| Who owes the debt? Check one.                                      | Nature of lien. Check all that apply.                                    |                        |                |             |
| ■ Debtor 1 only □ Debtor 2 only                                    | An agreement you made (such as mortgage or<br>car loan)                  | secured                |                |             |
| Debtor 1 and Debtor 2 only   | ☐ Statutory lien (such as tax lien, mechanic's lien                      | )                      |                |             |
| $\square$ At least one of the debtors and another                  | ☐ Judgment lien from a lawsuit   |                        |                |             |
| ☐ Check if this claim relates to a community debt                  | Other (including a right to offset)                                      |                        |                |             |
| Opened 07/19 Last Active 5/23/21                                   | Last 4 digits of account number  | 2                      |                |             |
|  |  |                        |                |             |
| Add the dollar value of your entries in C                          | Column A on this page. Write that number here:                           | \$66,591.00            | $\bar{o}$      |             |
| If this is the last page of your form, add Write that number here: | the dollar value totals from all pages.                                  | \$66,591.00            | $\overline{I}$ |             |

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| 0172072                                      |   | 0030 21 2200  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | •  |
|--|---|---|---|--|
| Fill in this                                 | information to identify your case:            |   |   | 1  |
|  |   |   |   |  |
| Debtor 1                                     | Dane William Johnson First Name               | Middle Name Last Name   | <del></del>                             |  |
| Debtor 2                                     |   |   |   |  |
| (Spouse if, fili                             | ng) First Name                                | Middle Name Last Name   | )                                       |  |
| United Sta                                   | tes Bankruptcy Court for the: EA              | STERN DISTRICT OF CALIFORNIA  |   |  |
| Case num                                     | ber   |   |   |  |
| (if known)                                   | · · · · · · · · · · · · · · · · · · ·         | <del></del>   |   | ☐ Check if this is an                      |
|  |   |   |   | amended filing                             |
|  | Form 106E/F                                   |   |   |  |
| Schedu                                       | ile E/F: Creditors Who                        | Have Unsecured Claims   | <u> </u>                                | 12/15                                      |
| Schedule Da<br>eft. Attach to<br>name and ca | Creditors Who Have Claims Secured I           | ou have no information to report in a Pai   | py the Part you need, fill it out       | , number the entries in the boxes on the   |
| 1. Do any                                    | creditors have priority unsecured clai        | ns against you?   |   |  |
| ■ No.  | Go to Part 2.                                 |   |   |  |
| ☐ Yes  |   |   |   |  |
|  |   |   |   |  |
| Part 2:                                      | List All of Your NONPRIORITY Un               | secured Claims  |   |  |
| 3. Do any                                    | creditors have nonpriority unsecured          | claims against you?   |   |  |
| ☐ No.  | You have nothing to report in this part. So   | bmit this form to the court with your other s   | chedules.                               |  |
| ■ Yes  |   |   |   |  |
| unsecu                                       | red claim, list the creditor separately for e | n the alphabetical order of the creditor wach claim. For each claim listed, identify whother creditors in Part 3.If you have more the | nat type of claim it is. Do not list of | claims already included in Part 1. If more |
|  |   |   |   | Total claim                                |
| 4.1 <b>A</b> ı                               | merica's Tire/Synchrony Car C                 | are Last 4 digits of account number   | er 2776                                 | \$0.00                                     |
|  | npriority Creditor's Name  D Box 960061       | When was the debt incurred?   |   |  |
|  | rlando, FL 32896-0061                         | when was the debt incurred?   |   |  |
|  | Imber Street City State Zip Code              | As of the date you file, the clai   | im is: Check all that apply             |  |
| WI   | no incurred the debt? Check one.              |   |   |  |
| -  | Debtor 1 only                                 | ☐ Contingent  |   |  |
|  | Debtor 2 only                                 | ☐ Unliquidated  |   |  |
|  | Debtor 1 and Debtor 2 only                    | ☐ Disputed  |   |  |
|  | At least one of the debtors and another       | Type of NONPRIORITY unsecu  | ıred claim:                             |  |
|  | Check if this claim is for a community        |   |   |  |
| de<br>Is                                     | bt<br>the claim subject to offset?            | ☐ Obligations arising out of a sereport as priority claims  | eparation agreement or divorce          | that you did not                           |
|  | No  | Debts to pension or profit-sha  | aring plans, and other similar de       | bts  |
|  |   |   |   |  |
| Ш  | Yes   | Other. Specify  |   |  |
|  |   |   |   |  |

| Debto | or 1 Dane William Johnson  |  | Case number (if known)                       |            |  |  |
|-------|--|--|--|------------|--|--|
| 4.2   | Capital One  | Last 4 digits of account number                              | 4349   | \$8,266.27 |  |  |
|       | Nonpriority Creditor's Name P.O. Box 60599 City of Industry, CA 91716-0599 | When was the debt incurred?                                  |  |            |  |  |
|       | Number Street City State Zip Code  | As of the date you file, the claim                           | is: Check all that apply                     |            |  |  |
|       | Who incurred the debt? Check one.  |  |  |            |  |  |
|       | ■ Debtor 1 only  | ☐ Contingent   |  |            |  |  |
|       | Debtor 2 only  | ☐ Unliquidated   |  |            |  |  |
|       | Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |  |  |
|       | ☐ At least one of the debtors and another                                  | Type of NONPRIORITY unsecured                                | d claim:                                     |            |  |  |
|       | ☐ Check if this claim is for a community                                   | ☐ Student loans  |  |            |  |  |
|       | debt<br>Is the claim subject to offset?                                    | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |            |  |  |
|       | ■ No   | Debts to pension or profit-sharing                           | g plans, and other similar debts             |            |  |  |
|       | □ Yes  | Other. Specify Platinum M                                    | asterCard credit card                        |            |  |  |
| 4.3   | Capital One  | Last 4 digits of account number                              | 4349   | \$8,428.00 |  |  |
|       | Nonpriority Creditor's Name  |  | Opened 04/11 Last Active                     |            |  |  |
|       | Po Box 31293<br>Salt Lake City, UT 84131                                   | When was the debt incurred?                                  | 12/20  |            |  |  |
|       | Number Street City State Zip Code  | As of the date you file, the claim                           | is: Check all that apply                     |            |  |  |
|       | Who incurred the debt? Check one.  |  |  |            |  |  |
|       | ■ Debtor 1 only  | ☐ Contingent   |  |            |  |  |
|       | Debtor 2 only  | ☐ Unliquidated   |  |            |  |  |
|       | Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |  |  |
|       | ☐ At least one of the debtors and another                                  | Type of NONPRIORITY unsecured                                | d claim:                                     |            |  |  |
|       | ☐ Check if this claim is for a community                                   | ☐ Student loans  |  |            |  |  |
|       | debt<br>Is the claim subject to offset?                                    | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |            |  |  |
|       | ■ No   | Debts to pension or profit-sharing                           | g plans, and other similar debts             |            |  |  |
|       | Yes  | Other. Specify Credit Card                                   | <u> </u>                                     |            |  |  |
| 4.4   | Cardmember Service   | Last 4 digits of account number                              | 1137   | \$8,306.78 |  |  |
|       | Nonpriority Creditor's Name PO Box 6294                                    | When was the debt incurred?                                  |  |            |  |  |
|       | Carol Stream, IL 60197-6294  Number Street City State Zip Code             | As of the date you file, the claim                           | is: Check all that apply                     |            |  |  |
|       | Who incurred the debt? Check one.  | As of the date you file, the claim                           | <b>s.</b> Спеск ан тат арріу                 |            |  |  |
|       | Debtor 1 only  | ☐ Contingent   |  |            |  |  |
|       | Debtor 2 only  | ☐ Unliquidated   |  |            |  |  |
|       | Debtor 1 and Debtor 2 only   |  |  |            |  |  |
|       | ☐ At least one of the debtors and another                                  | <b>-</b>   |  |            |  |  |
|       | ☐ Check if this claim is for a community                                   | Student loans  |  |            |  |  |
|       | debt Is the claim subject to offset?                                       | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |            |  |  |
|       | ■ No   | Debts to pension or profit-sharing                           | g plans, and other similar debts             |            |  |  |
|       | ☐ Yes  | Other Specify Credit Card                                    | I  |            |  |  |

| Debto | <sup>1</sup> Dane William Johnson  |  | Case number (if known)                        |            |  |
|-------|--|--|---|------------|--|
| 4.5   | Chase Card Services  | Last 4 digits of account number                              | 1137  | \$8,306.00 |  |
|       | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850     | When was the debt incurred?                                  | Opened 08/19 Last Active 12/20                |            |  |
|       | Number Street City State Zip Code  Who incurred the debt? Check one.               | As of the date you file, the claim                           | is: Check all that apply                      |            |  |
|       | Debtor 1 only  | ☐ Contingent   |   |            |  |
|       | Debtor 2 only  | ☐ Unliquidated   |   |            |  |
|       | Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |            |  |
|       | lacksquare At least one of the debtors and another                                 | Type of NONPRIORITY unsecured                                | d claim:                                      |            |  |
|       | ☐ Check if this claim is for a community   | Student loans  |   |            |  |
|       | debt Is the claim subject to offset?   | Obligations arising out of a separeport as priority claims   | aration agreement or divorce that you did not |            |  |
|       | ■ No   | Debts to pension or profit-sharing                           | ng plans, and other similar debts             |            |  |
|       | Yes  | ■ Other. Specify Credit Card                                 | 1   |            |  |
| 4.6   | Citi/Sears Nonpriority Creditor's Name   | Last 4 digits of account number                              | 3443  | \$4,145.00 |  |
|       | Citibank/Centralized Bankruptcy Po Box 790034                                      | When was the debt incurred?                                  | Opened 01/16 Last Active 12/20                |            |  |
|       | St Louis, MO 63179  Number Street City State Zip Code                              | As of the date you file, the claim                           | is: Check all that apply                      |            |  |
|       | Who incurred the debt? Check one.  | • ,  | ,   |            |  |
|       | Debtor 1 only  | ☐ Contingent   |   |            |  |
|       | Debtor 2 only  | ☐ Unliquidated   |   |            |  |
|       | Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |            |  |
|       | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                | d claim:                                      |            |  |
|       | ☐ Check if this claim is for a community   | ☐ Student loans  |   |            |  |
|       | debt Is the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims |   |            |  |
|       | ■ No   | Debts to pension or profit-sharing                           |   |            |  |
|       | □Yes   | Other. Specify Credit Card                                   | 1   |            |  |
| 4.7   | Citibank/The Home Depot  | Last 4 digits of account number                              | 1796  | \$2,954.00 |  |
|       | Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Bk dept Po Box 790034 | When was the debt incurred?                                  | Opened 01/16 Last Active 01/21                |            |  |
|       | St Louis, MO 63179  Number Street City State Zip Code                              | As of the date you file, the claim                           | is: Check all that apply                      |            |  |
|       | Who incurred the debt? Check one.  | • ,  | ,   |            |  |
|       | ■ Debtor 1 only  | ☐ Contingent   |   |            |  |
|       | Debtor 2 only  | □ Unliquidated   |   |            |  |
|       | ☐ Debtor 1 and Debtor 2 only   |  |   |            |  |
|       | ☐ At least one of the debtors and another  | d claim:   |   |            |  |
|       | ☐ Check if this claim is for a community   | ☐ Student loans  |   |            |  |
|       | debt Is the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims |   |            |  |
|       | No   | Debts to pension or profit-sharing                           | ng plans, and other similar debts             |            |  |
|       | □Yes   | ■ Other. Specify Charge Acc                                  | count   |            |  |

| Debtor | Dane William Johnson  |  | Case number (if known)                       |             |  |  |
|--------|---|--|--|-------------|--|--|
| 4.8    | Comenity Bank/Kay Jewelers  | Last 4 digits of account number  | 1435   | \$4,486.00  |  |  |
|        | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125 Columbus, OH 43218 | When was the debt incurred?  | Opened 09/20 Last Active 01/21               |             |  |  |
|        | Number Street City State Zip Code  Who incurred the debt? Check one.          | As of the date you file, the claim   | s: Check all that apply                      |             |  |  |
|        | ■ Debtor 1 only   | ☐ Contingent   |  |             |  |  |
|        | ☐ Debtor 2 only   | ☐ Unliquidated   |  |             |  |  |
|        | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |  |             |  |  |
|        | $\square$ At least one of the debtors and another                             | Type of NONPRIORITY unsecure   | d claim:                                     |             |  |  |
|        | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |             |  |  |
|        | No  | Debts to pension or profit-sharing   | g plans, and other similar debts             |             |  |  |
|        | Yes   | ■ Other. Specify Charge Acc  |  |             |  |  |
| 4.9    | Comenity/zlotlt   | Last 4 digits of account number  | 2347   | \$2,825.00  |  |  |
|        | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125 Columbus, OH 45318 | When was the debt incurred?  | Opened 10/20 Last Active 02/21               |             |  |  |
|        | Number Street City State Zip Code  Who incurred the debt? Check one.          | As of the date you file, the claim   | s: Check all that apply                      |             |  |  |
|        | ■ Debtor 1 only   | ☐ Contingent   |  |             |  |  |
|        | ☐ Debtor 2 only   | ☐ Unliquidated   |  |             |  |  |
|        | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |  |             |  |  |
|        | ☐ At least one of the debtors and another                                     | Type of NONPRIORITY unsecure   | d claim:                                     |             |  |  |
|        | ☐ Check if this claim is for a community debt                                 | Student loans  |  |             |  |  |
|        | Is the claim subject to offset?   | report as priority claims  | ration agreement or divorce that you did not |             |  |  |
|        | ■ No  | Debts to pension or profit-sharing   | g plans, and other similar debts             |             |  |  |
|        | Yes   | Other. Specify Charge Acc  |  |             |  |  |
| 4.1    | Discover Financial Nonpriority Creditor's Name                                | Last 4 digits of account number  | 6260   | \$24,855.00 |  |  |
|        | Attn: Bankruptcy Po Box 3025 New Albany, OH 43054                             | When was the debt incurred?  | Opened 09/12 Last Active 09/20               |             |  |  |
|        | Number Street City State Zip Code Who incurred the debt? Check one.           | As of the date you file, the claim   | s: Check all that apply                      |             |  |  |
|        | ■ Debtor 1 only   | ☐ Contingent   |  |             |  |  |
|        | ☐ Debtor 2 only   | ☐ Unliquidated   |  |             |  |  |
|        | ☐ Debtor 1 and Debtor 2 only  | Disputed   |  |             |  |  |
|        | At least one of the debtors and another                                       | Type of NONPRIORITY unsecure   |  |             |  |  |
|        | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |             |  |  |
|        | ■ No  | ☐ Debts to pension or profit-sharing   | g plans, and other similar debts             |             |  |  |
|        | ☐ Yes   | ■ Other Specify Credit Card  |  |             |  |  |

| Debto    | or 1 Dane William Johnson   |  | Case number (if known)  |             |
|----------|---|--|---|-------------|
| 4.1<br>1 | Discover Personal Loans   | Last 4 digits of account number  | 0558  | \$25,153.00 |
|          | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30954 Salt Lake City, UT 84130  | When was the debt incurred?  | Opened 03/18 Last Active 01/21  |             |
|          | Number Street City State Zip Code Who incurred the debt? Check one.   | As of the date you file, the claim i   | s: Check all that apply   |             |
|          | ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another  | ☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured ☐ Student loans                                    | d claim:  |             |
|          | ☐ Check if this claim is for a community debt Is the claim subject to offset?  ■ No   |  | ration agreement or divorce that you did not g plans, and other similar debts |             |
|          | Yes   | Other. Specify Unsecured   |   |             |
| 4.1      | Freedom Road Financial Nonpriority Creditor's Name  | Last 4 digits of account number  | 6986  | \$8,800.00  |
|          | Attn: Bankruptcy Po Box 4597 Oak Brook, IL 60522  | When was the debt incurred?  | Opened 10/20 Last Active 4/02/21  |             |
|          | Number Street City State Zip Code Who incurred the debt? Check one.   | As of the date you file, the claim i   | s: Check all that apply   |             |
|          | ■ Debtor 1 only  □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt | ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a sepa | d claim:  ration agreement or divorce that you did not                        |             |
|          | Is the claim subject to offset?  ■ No   | report as priority claims  ☐ Debts to pension or profit-sharin   |   |             |
|          | Yes   | Other. Specify Recreation  | al  |             |
| 4.1      | Home Depot Credit Services  Nonpriority Creditor's Name P.O. BOX 78011  | Last 4 digits of account number  When was the debt incurred?   | 1796  | \$2,678.51  |
|          | Phoenix, AZ 85062-8011  Number Street City State Zip Code  Who incurred the debt? Check one.  | As of the date you file, the claim i   | s: Check all that apply   |             |
|          | ■ Debtor 1 only □ Debtor 2 only   | ☐ Contingent ☐ Unliquidated  |   |             |
|          | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?  | ☐ Disputed  Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims   | d claim: ration agreement or divorce that you did not                         |             |
|          | ■ No<br>□ Yes   | ☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card   |   |             |

| otor | Dane William Johnson   |  | Case number (if known)                       |           |
|------|--|--|--|-----------|
|      | Kay Jewelers   | Last 4 digits of account number          | 1435   | \$4,341.  |
|      | Nonpriority Creditor's Name PO Box 659728                            | When was the debt incurred?              |  |           |
|      | San Antonio, TX 78265-9728   |  |  |           |
|      | Number Street City State Zip Code  Who incurred the debt? Check one. | As of the date you file, the claim       | is: Check all that apply                     |           |
|      | Debtor 1 only  | Пол                                      |  |           |
|      |  | ☐ Contingent                             |  |           |
|      | Debtor 2 only  | ☐ Unliquidated                           |  |           |
|      | Debtor 1 and Debtor 2 only   | ☐ Disputed  Type of NONPRIORITY unsecure | d alaim.                                     |           |
|      | At least one of the debtors and another                              | Student loans                            | d Claim.                                     |           |
|      | ☐ Check if this claim is for a community debt                        | _  | ration agreement or divorce that you did not |           |
|      | Is the claim subject to offset?                                      | report as priority claims                | nation agreement of divorce that you did not |           |
|      | ■ No   | Debts to pension or profit-sharing       | g plans, and other similar debts             |           |
|      | Yes  | Other. Specify Credit Card               | <u> </u>                                     |           |
|      | Safe Credit Union  | Last 4 digits of account number          | 5610   | \$15,594. |
|      | Nonpriority Creditor's Name 2295 Iron Point Road                     | _  | Opened 6/27/15 Last Active                   |           |
|      | Suite 100  | When was the debt incurred?              | 6/24/21                                      |           |
|      | Folsom, CA 35630  Number Street City State Zip Code                  | As of the date you file, the claim       | is. Chack all that apply                     |           |
|      | Who incurred the debt? Check one.                                    | As of the date you me, the claim         | s. Check all that apply                      |           |
|      | ■ Debtor 1 only  | ☐ Contingent                             |  |           |
|      | Debtor 2 only  | ☐ Unliquidated                           |  |           |
|      | Debtor 1 and Debtor 2 only   | ☐ Disputed                               |  |           |
|      | At least one of the debtors and another                              | Type of NONPRIORITY unsecure             | d claim:                                     |           |
|      | ☐ Check if this claim is for a community                             | ☐ Student loans                          |  |           |
|      | debt   | ☐ Obligations arising out of a sepa      | ration agreement or divorce that you did not |           |
|      | Is the claim subject to offset?                                      | report as priority claims                | Ç  |           |
|      | No   | Debts to pension or profit-sharing       | g plans, and other similar debts             |           |
|      | Yes  | Other. Specify Credit Card               | <u> </u>                                     |           |
|      | Sears Credit Cards   | Last 4 digits of account number          | 3443   | \$3,898.  |
|      | Nonpriority Creditor's Name  | _  |  |           |
|      | PO Box 78051<br>Phoenix, AZ 85062-8051                               | When was the debt incurred?              |  |           |
|      | Number Street City State Zip Code                                    | As of the date you file, the claim       | is: Check all that apply                     |           |
|      | Who incurred the debt? Check one.                                    |  |  |           |
|      | ■ Debtor 1 only  | ☐ Contingent                             |  |           |
|      | ☐ Debtor 2 only  | ☐ Unliquidated                           |  |           |
|      | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed                               |  |           |
|      | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecure             | d claim:                                     |           |
|      | ☐ Check if this claim is for a community                             | ☐ Student loans                          |  |           |
|      | debt   |  | ration agreement or divorce that you did not |           |
|      | Is the claim subject to offset?                                      | report as priority claims                |  |           |
|      | No   | Debts to pension or profit-sharing       |  |           |
|      | □ Yes  | Other Credit Card                        | l  |           |

| Debto    | Dane William Johnson   |  | Case number (if known)   |            |
|----------|--|--|--|------------|
| 4.1      | Security Credit Services  Nonpriority Creditor's Name  | Last 4 digits of account number  | 0357   | \$1,500.00 |
|          | Attn: Bankruptcy<br>Po Box 1156<br>Oxford, MS 38655  | When was the debt incurred?  | Opened 04/21 Last Active<br>11/20                                  |            |
|          | Number Street City State Zip Code  Who incurred the debt? Check one.                                   | As of the date you file, the claim i   | s: Check all that apply  |            |
|          | ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another | ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured         | d claim:   |            |
|          | ☐ Check if this claim is for a community debt Is the claim subject to offset?                          | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not                       |            |
|          | ■ No<br>□ Yes  | ☐ Debts to pension or profit-sharin  ☐ Other, Specify Collection in          | g plans, and other similar debts<br>Attorney Credova Financial LIc |            |
|          |  |  |  |            |
| 4.1<br>8 | Sewing and More/Synchrony Bank  Nonpriority Creditor's Name  | Last 4 digits of account number  | 1197   | \$2,811.62 |
|          | PO Box 960061<br>Orlando, FL 32896-0061  | When was the debt incurred?  |  |            |
|          | Number Street City State Zip Code Who incurred the debt? Check one.                                    | As of the date you file, the claim i   | s: Check all that apply  |            |
|          | Debtor 1 only  | ☐ Contingent   |  |            |
|          | Debtor 2 only  | ☐ Unliquidated   |  |            |
|          | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |
|          | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured  |  |            |
|          | ☐ Check if this claim is for a community   | ☐ Student loans  |  |            |
|          | debt Is the claim subject to offset?   | ☐ Obligations arising out of a sepa<br>report as priority claims             | ration agreement or divorce that you did not                       |            |
|          | ■ No   | Debts to pension or profit-sharing   | g plans, and other similar debts                                   |            |
|          | Yes  | Other. Specify   |  |            |
| 4.1<br>9 | Syncb/ccamtr Nonpriority Creditor's Name   | Last 4 digits of account number  | 2776   | \$1,285.00 |
|          | Attn: Bankruptcy<br>Po Box 965060<br>Orlando, FL 32896   | When was the debt incurred?  | Opened 8/08/19 Last Active<br>10/20                                |            |
|          | Number Street City State Zip Code  Who incurred the debt? Check one.                                   | As of the date you file, the claim i   | s: Check all that apply  |            |
|          | ■ Debtor 1 only  | ☐ Contingent   |  |            |
|          | Debtor 2 only  | ☐ Unliquidated   |  |            |
|          | Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |
|          | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured  | d claim:   |            |
|          | ☐ Check if this claim is for a community   | Student loans  |  |            |
|          | debt   | ☐ Obligations arising out of a sepa  | ration agreement or divorce that you did not                       |            |
|          | Is the claim subject to offset?  | report as priority claims  | -  |            |
|          | ■ No   | ☐ Debts to pension or profit-sharin  | g plans, and other similar debts                                   |            |
|          | Πyes   | Other Specify Charge Acc   | count  |            |

| Debte    | Dane William Johnson   |  |  |             |  |  |  |
|----------|--|--|--|-------------|--|--|--|
| 4.2      | Synchrony Bank   | Last 4 digits of account number                              | 1197   | \$2,938.00  |  |  |  |
|          | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896               | When was the debt incurred?                                  | Opened 09/20 Last Active 3/28/21             | _           |  |  |  |
|          | Number Street City State Zip Code  Who incurred the debt? Check one.                       | As of the date you file, the claim i                         | s: Check all that apply                      |             |  |  |  |
|          | ■ Debtor 1 only  | ☐ Contingent   |  |             |  |  |  |
|          | Debtor 2 only  | ☐ Unliquidated   |  |             |  |  |  |
|          | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |             |  |  |  |
|          | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                | d claim:                                     |             |  |  |  |
|          | ☐ Check if this claim is for a community   | ☐ Student loans  |  |             |  |  |  |
|          | debt Is the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |             |  |  |  |
|          | ■ No   | Debts to pension or profit-sharing                           |  |             |  |  |  |
|          | □Yes   | Other. Specify Charge Acc                                    | count  | _           |  |  |  |
| 4.2<br>1 | Synchrony Bank/Lowes   | Last 4 digits of account number                              | 6956   | \$11,757.00 |  |  |  |
|          | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando El 33806                | When was the debt incurred?                                  | Opened 01/16 Last Active 12/20               | _           |  |  |  |
|          | Orlando, FL 32896  Number Street City State Zip Code                                       | As of the date you file, the claim i                         | s: Check all that apply                      |             |  |  |  |
|          | Who incurred the debt? Check one.  | •  |  |             |  |  |  |
|          | ■ Debtor 1 only  |  |  |             |  |  |  |
|          | Debtor 2 only  | ☐ Contingent ☐ Unliquidated                                  |  |             |  |  |  |
|          | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |             |  |  |  |
|          | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                | d claim:                                     |             |  |  |  |
|          | ☐ Check if this claim is for a community   | ☐ Student loans  |  |             |  |  |  |
|          | debt Is the claim subject to offset?   | report as priority claims                                    | ration agreement or divorce that you did not |             |  |  |  |
|          | ■ No   | ☐ Debts to pension or profit-sharin                          |  |             |  |  |  |
|          | Yes  | ■ Other. Specify Charge Acc                                  | _  |             |  |  |  |
| 4.2      | US Bank/RMS Nonpriority Creditor's Name  | Last 4 digits of account number                              | 2460   | \$18,077.00 |  |  |  |
|          | Attn: Bankruptcy<br>Po Box 5229  | When was the debt incurred?                                  | Opened 6/01/15 Last Active 11/20             | _           |  |  |  |
|          | Cincinnati, OH 45201  Number Street City State Zip Code  Who incurred the debt? Check one. | As of the date you file, the claim i                         |  |             |  |  |  |
|          | ■ Debtor 1 only  | ☐ Contingent   |  |             |  |  |  |
|          | ☐ Debtor 2 only  |  |  |             |  |  |  |
|          | Debtor 1 and Debtor 2 only   |  |  |             |  |  |  |
|          | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                | d claim:                                     |             |  |  |  |
|          | ☐ Check if this claim is for a community   | ☐ Student loans  |  |             |  |  |  |
|          | debt   | ☐ Obligations arising out of a sepa                          |  |             |  |  |  |
|          | Is the claim subject to offset?  | report as priority claims                                    |  |             |  |  |  |
|          | No   | Debts to pension or profit-sharing                           | g plans, and other similar debts             |             |  |  |  |
|          | Yes Other Specify Credit Card  |  |  |             |  |  |  |

| Dane William Johnson                      | Case number (if known)  |            |
|---|---|------------|
| Zales Outlet                              | Last 4 digits of account number 2347  | \$2,698.52 |
| Nonpriority Creditor's Name PO Box 659819 | When was the debt incurred?   |            |
| San Antonio, TX 78265-9119                | when was the dept incurred:   | <u> </u>   |
| Number Street City State Zip Code         | As of the date you file, the claim is: Check all that apply   |            |
| Who incurred the debt? Check one.         |   |            |
| Debtor 1 only                             | ☐ Contingent  |            |
| Debtor 2 only                             | ☐ Unliquidated  |            |
| ☐ Debtor 1 and Debtor 2 only              | ☐ Disputed  |            |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim:  |            |
| ☐ Check if this claim is for a community  | ☐ Student loans   |            |
| debt Is the claim subject to offset?      | Dobligations arising out of a separation agreement or divorce that you did no report as priority claims | ot         |
| No  | Debts to pension or profit-sharing plans, and other similar debts                                       |            |
| □Yes                                      | Other. Specify  |            |

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total Older

|                       |     |   |     | Total Claim      |
|-----------------------|-----|---|-----|------------------|
|                       | 6a. | Domestic support obligations  | 6a. | \$<br>0.00       |
| Total claims          |     |   |     |                  |
| from Part 1           | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$<br>0.00       |
|                       | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$<br>0.00       |
|                       | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$<br>0.00       |
|                       | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$<br>0.00       |
|                       |     |   |     | Total Claim      |
| Total                 | 6f. | Student loans   | 6f. | \$<br>0.00       |
| claims<br>from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$<br>0.00       |
|                       | 6h. |   | 6h. | \$<br>0.00       |
|                       | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$<br>174,104.14 |
|                       | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$<br>174,104.14 |

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

| Fill in this information to identify your case: |                  |                    |              |  |
|---|------------------|--------------------|--------------|--|
| Debtor 1  | Dane William Joh | nson               |              |  |
|   | First Name       | Middle Name        | Last Name    |  |
| Debtor 2  |                  |                    |              |  |
| (Spouse if, filing)                             | First Name       | Middle Name        | Last Name    |  |
| United States Bankruptcy Court for the:         |                  | EASTERN DISTRICT O | F CALIFORNIA |  |
| Case number                                     |                  |                    |              |  |
| (if known)                                      |                  |                    |              |  |
|   |                  |                    |              |  |

☐ Check if this is an amended filing

## Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with | n whom you have the c<br>er, Street, City, State and ZIP Co | ontract or lease | State what the contract or lease is for |
|-----|-----------|--------------|---|------------------|---|
| 2.1 |           |              |   |                  |   |
|     | Name      |              |   |                  | _                                       |
|     | Number    | Street       |   |                  | _                                       |
|     | City      |              | State   | ZIP Code         |   |
| 2.2 |           |              |   |                  |   |
|     | Name      |              |   |                  |   |
|     | Number    | Street       |   |                  | _                                       |
|     | City      |              | State   | ZIP Code         | <del>_</del>                            |
| 2.3 | Ony       |              | Ciaio   | 211 0000         |   |
|     | Name      |              |   |                  |   |
|     |           |              |   |                  |   |
|     | Number    | Street       |   |                  |   |
|     | City      |              | State   | ZIP Code         | _                                       |
| 2.4 |           |              |   |                  |   |
|     | Name      |              |   |                  | _                                       |
|     | Number    | Street       |   |                  | _                                       |
|     | City      |              | State   | ZIP Code         | _                                       |
| 2.5 |           |              |   |                  |   |
|     | Name      |              |   |                  |   |
|     | Number    | Street       |   |                  |   |
|     | City      |              | State   | ZIP Code         |   |
|     |           |              |   |                  |   |

|   |   |   |  |   | •  |   |
|---|---|---|--|---|--|---|
| is information to                                       | identify your   | case:   |  |   |  |   |
| Dane  | William Joh   | nson  |  |   |  |   |
|   | ame   | Middle Name   | Last Name  |   |  |   |
|   | ame   | Middle Name   | Last Name  |   |  |   |
| •   | 0 11  |   | OF OAL IFORNIA   |   |  |   |
| tates Bankruptcy  | Court for the:  | EASTERN DISTRICT  | OF CALIFORNIA  |   |  |   |
| mber  |   |   |  |   |  |   |
|   |   |   |  |   | _  | n   |
|   |   |   |  |   | amended filing   |   |
| al Form 10  | 06H   |   |  |   |  |   |
|   |   | ahtors  |  |   | 4  | 2/15  |
| dule II. I  | our cou   | EDIOI 3   |  |   | <u>'</u>   | 2/13  |
| re filing together<br>and number the<br>ne and case num | r, both are equa<br>entries in the<br>aber (if known)   | ally responsible for sup<br>boxes on the left. Atta<br>. Answer every questic   | oplying correct information<br>ch the Additional Page to t<br>on.  | n. If more space is this page. On the to  | needed, copy the Additiona   | I Page,   |
| o you nave any o  | codebtors? (IF)   | ou are filing a joint case  | e, do not list either spouse as  | s a codebtor.   |  |   |
| o<br>es   |   |   |  |   |  |   |
|   |   |   |  |   |  | е   |
| o Go to lino 3  |   |   |  |   |  |   |
|   | se, former spou   | se, or legal equivalent li  | ve with you at the time?   |   |  |   |
| ne 2 again as a c                                       | odebtor only it   | that person is a guara  | ntor or cosigner. Make su  | re you have listed t  | the creditor on Schedule D   | (Officia  |
|   |   | P Code  |  |   |  | e debt  |
| 6116 Everest  | Way   |   |  | ☐ Schedule E/F  | <sup>-</sup> , line  |   |
|   | Dane First Na First Na tates Bankruptcy mber  al Form 10 dule H: Y  rs are people or re filing together and number the he and case num to you have any of es ithin the last 8 y ona, California, Id o. Go to line 3. es. Did your spou olumn 1, list all one 2 again as a c in 106D), Schedu Column 2.  Column 1: Your Name, Number, Stre  Olivie Huelen 6116 Everest | Dane William John First Name  tates Bankruptcy Court for the:  mber  al Form 106H  dule H: Your Code  re are people or entities who are filing together, both are equal and number the entries in the ne and case number (if known).  To you have any codebtors? (If your codebtons, California, Idaho, Louisiana, on Go to line 3.  es. Did your spouse, former spound on the 2 again as a codebtor only if in 106D), Schedule E/F (Official Column 2. | tates Bankruptcy Court for the: EASTERN DISTRICT mber  al Form 106H  dule H: Your Codebtors  re are people or entities who are also liable for any degree filing together, both are equally responsible for sugand number the entries in the boxes on the left. Attaine and case number (if known). Answer every questic to you have any codebtors? (If you are filing a joint case of you have any codebtors? (If you are filing a joint case of you have any codebtors? (If you are filing a joint case of you have any codebtors? (If you are filing a joint case of you have any codebtors? (If you are filing a joint case of you have any codebtors? (If you are filing a joint case of you have any codebtors? (If you are filing a joint case of your have any codebtors?) | Dane William Johnson First Name Middle Name Last Name tates Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA  The same People or entities who are also liable for any debts you may have. Be as the filling together, both are equally responsible for supplying correct information and number the entries in the boxes on the left. Attach the Additional Page to the left and case number (if known). Answer every question.  To you have any codebtors? (If you are filling a joint case, do not list either spouse as the last 8 years, have you lived in a community property state or territory? One, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washing One, Go to line 3.  The ses. Did your spouse, former spouse, or legal equivalent live with you at the time?  Tolumn 1, list all of your codebtors. Do not include your spouse as a codebtor if the 2 again as a codebtor only if that person is a guarantor or cosigner. Make sum 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106C/Column 2.  **Column 1: Your codebtor Name, Number, Street, City, State and ZIP Code**  Olivie Hueleng 6116 Everest Way | Dane William Johnson First Name Middle Name Last Name  tates Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA  mber  all Form 106H  dule H: Your Codebtors  are people or entities who are also liable for any debts you may have. Be as complete and accure filing together, both are equally responsible for supplying correct information. If more space is and number the entries in the boxes on the left. Attach the Additional Page to this page. On the total earn of the complete in the property of the complete in the complete in the property of the complete in the complete in the complete in the property of the complete in the comp | Dane William Johnson First Name Middle Name Last Name  lates Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA  mber Cates Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA  mber Check if this is at a mended filling  all Form 106H  dule H: Your Codebtors  1  Check if this is at a mended filling together, both are equally responsible for any debts you may have. Be as complete and accurate as possible. If two marre e filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Pages, are and case number (if known). Answer every question.  by you have any codebtors? (If you are filling a joint case, do not list either spouse as a codebtor.  by you have any codebtors? (If you are filling a joint case, do not list either spouse as a codebtor.  consistent in the last 8 years, have you lived in a community property state or territory? (Community property states and territories including, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  co. Go to line 3.  se. Did your spouse, former spouse, or legal equivalent live with you at the time?  Dolumn 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person be 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D in 106D). Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule D, Inne |

Schedule H: Your Codebtors

| Fill in this informa            | ition to identify your case:  |   |
|---------------------------------|---|---|
| Debtor 1                        | Dane William Johnson  |   |
| Debtor 2<br>(Spouse, if filing) |   |   |
| United States Bar               | nkruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA                  |   |
| Case number                     |   | Check if this is:   |
| (If known)                      |   | ☐ An amended filing   |
|                                 |   | A supplement showing postpetition chapter 13 income as of the following date: |
| Official Fo                     | orm 106I  | MM / DD/ YYYY   |
| <b>Schedule</b>                 | I: Your Income  | 12/15   |
| Be as complete a                | and accurate as possible. If two married people are filing together (De | ebtor 1 and Debtor 2), both are equally responsible for                       |

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | Describe Employment   |                      |                |                                |
|-----|---|----------------------|----------------|--------------------------------|
| 1.  | Fill in your employment information.  |                      | Debtor 1       | Debtor 2 or non-filling spouse |
|     | If you have more than one job, attach a separate page with information about additional | Empleyment status    | ☐ Employed     | ☐ Employed                     |
|     |   | Employment status    | ■ Not employed | ■ Not employed                 |
|     | employers.  | Occupation           | Unemployed     | Unemployed                     |
|     | Include part-time, seasonal, or self-employed work.                                     | Employer's name      |                |                                |
|     | Occupation may include student or homemaker, if it applies.                             | Employer's address   |                |                                |
|     |   | How long employed th | nere?          |                                |
| Par | Give Details About Mor  | nthly Income         |                |                                |

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- 3. Estimate and list monthly overtime pay.
- 4. Calculate gross Income. Add line 2 + line 3.

|    |     | For Debtor 1 |     | Debtor 2 or<br>-filing spouse |
|----|-----|--------------|-----|-------------------------------|
| 2. | \$  | 0.00         | \$  | 0.00                          |
| 3. | +\$ | 0.00         | +\$ | 0.00                          |
| 4. | \$  | 0.00         | \$  | 0.00                          |

| Debt | or 1               | Dane William Johnson  | _          | Ca   | ase number (if known) |          |             |         |                          |
|------|--------------------|---|------------|------|-----------------------|----------|-------------|---------|--------------------------|
|      |                    |   |            | F    | For Debtor 1          |          | or Debtor   |         |                          |
|      | _                  |   |            |      |                       |          | on-filing s | -       |                          |
|      | Cop                | by line 4 here  | 4.         | \$   | 0.00                  | \$       |             | 0.00    | <u> </u>                 |
| 5.   | List               | all payroll deductions:   |            |      |                       |          |             |         |                          |
|      | 5a.                | Tax, Medicare, and Social Security deductions   | 5a.        |      |                       | \$       |             | 0.00    | _                        |
|      | 5b.                | Mandatory contributions for retirement plans  | 5b.        |      |                       | \$       |             | 0.00    | _                        |
|      | 5c.                | Voluntary contributions for retirement plans  | 5c.        |      |                       | \$       |             | 0.00    | _                        |
|      | 5d.                | Required repayments of retirement fund loans  | 5d.        |      |                       | \$<br>\$ |             | 0.00    | _                        |
|      | 5e.<br>5f.         | Insurance Domestic support obligations  | 5e.<br>5f. | \$   |                       | \$       |             | 0.00    |                          |
|      | 5g.                | Union dues  | 5g.        |      |                       | \$       |             | 0.00    |                          |
|      | 5h.                | Other deductions. Specify:  | 5h.        |      |                       |          |             | 0.00    | _                        |
| 6.   | Add                | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.         | \$   | 0.00                  | \$       |             | 0.00    | _<br>)                   |
| 7.   | Cal                | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.         | \$   | 0.00                  | \$       |             | 0.00    | <u> </u>                 |
| 8.   | List<br>8a.        | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total                       |            |      |                       |          |             |         | _                        |
|      |                    | monthly net income.   | 8a.        | \$   | 0.00                  | \$       |             | 0.00    | )                        |
|      | 8b.                | Interest and dividends  | 8b.        | *    |                       | \$       |             | 0.00    | _                        |
|      | 8c.                | Family support payments that you, a non-filing spouse, or a dependent regularly receive   |            |      |                       |          |             |         | _                        |
|      |                    | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  | 8c.        | \$   | 0.00                  | \$       |             | 0.00    | )                        |
|      | 8d.                | Unemployment compensation   | 8d.        | \$   |                       | \$       | 2,          | 00.00   | _                        |
|      | 8e.                | Social Security   | 8e.        | \$   | 0.00                  | \$       |             | 0.00    | )                        |
|      | 8f.                | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:         | 8f.        | \$   | 0.00                  | \$       |             | 0.00    | _                        |
|      | 8g.                | Pension or retirement income  | 8g.        |      |                       | \$       |             | 0.00    | _                        |
|      | 8h.                | Other monthly income. Specify:  | 8h         | + \$ | 0.00                  | + \$     |             | 0.00    | <u></u>                  |
| 9.   | Add                | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.         | \$_  | 2,748.00              | \$       | 2           | 2,000.0 | 0                        |
| 10.  |                    |   | 10. \$     | 5    | 2,748.00 + \$         | 2        | 2,000.00    | = \$    | 4,748.00                 |
|      | Add                | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | L          |      |                       |          |             |         |                          |
| 11.  | Incl<br>othe<br>Do | te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify: | deper      |      | . •                   |          |             |         | 0.00                     |
| 12.  |                    | I the amount in the last column of line 10 to the amount in line 11. The reserve that amount on the Summary of Schedules and Statistical Summary of Certailies  |            |      |                       |          |             | \$      | 4,748.00                 |
|      |                    |   |            |      |                       |          |             | Combi   | ned<br>ly income         |
| 13.  | Do                 | you expect an increase or decrease within the year after you file this form   | ?          |      |                       |          |             |         | iy iiiooiii <del>o</del> |
|      |                    | No  |            |      |                       |          |             |         |                          |
|      |                    | Yes. Explain:   |            |      |                       |          |             |         | _                        |

| Eill       | in this informe          | tion to identify yo                  | ur caca:               |  |                          | I               |                                    |  |
|------------|--------------------------|--------------------------------------|------------------------|--|--------------------------|-----------------|------------------------------------|--|
|            |                          |                                      |                        |  |                          | <b>.</b>        |                                    |  |
| Deb        | otor 1                   | Dane William                         | Johnso                 | on   |                          |                 | k if this is:<br>An amended filing |  |
| Deb        | otor 2                   |                                      |                        |  |                          | _               | •                                  | ving postpetition chapter                            |
| (Spo       | ouse, if filing)         |                                      |                        |  |                          | _ 1             | 13 expenses as of                  | the following date:                                  |
| Unit       | ted States Bankr         | uptcy Court for the:                 | EASTE                  | RN DISTRICT OF CAL                                 | IFORNIA                  | 1               | MM / DD / YYYY                     |  |
|            | se number<br>nown)       |                                      |                        |  |                          |                 |                                    |  |
| 0          | fficial Fo               | rm 106J                              |                        |  |                          |                 |                                    |  |
| S          | chedule                  | J: Your E                            | Exper                  | nses   |                          |                 |                                    | 12/15  |
| Be<br>info | as complete a            | and accurate as                      | possible<br>eded, atta | . If two married people<br>ich another sheet to th |                          |                 |                                    |  |
| Par        |                          | ibe Your House                       | hold                   |  |                          |                 |                                    |  |
| 1.         | Is this a join           |                                      |                        |  |                          |                 |                                    |  |
|            | ■ No. Go to              |                                      | n a conor              | ate household?                                     |                          |                 |                                    |  |
|            | □ res. <b>Doe</b>        |                                      | ii a sepai             | ate nousenoid?                                     |                          |                 |                                    |  |
|            | =                        | -                                    | t file Offic           | ial Form 106J-2, <i>Expens</i>                     | ses for Separate House   | ehold of Debto  | or 2.                              |  |
| 2          |                          |                                      | _                      | , ,  |                          |                 |                                    |  |
| 2.         | •                        | e dependents?                        | □ No                   |  |                          |                 |                                    |  |
|            | Do not list De Debtor 2. | ebtor 1 and                          | ■ Yes.                 | Fill out this information fo<br>each dependent     |                          |                 | Dependent's age                    | Does dependent live with you?                        |
|            | Do not state             | the                                  |                        |  |                          |                 |                                    | □ No   |
|            | dependents               | names.                               |                        |  | Son                      |                 | 8                                  | Yes  |
|            |                          |                                      |                        |  | 0                        |                 | 44                                 | □ No   |
|            |                          |                                      |                        |  | Son                      |                 | 11                                 | ■ Yes  |
|            |                          |                                      |                        |  |                          |                 |                                    | □ No   |
|            |                          |                                      |                        |  |                          |                 |                                    | ☐ Yes<br>☐ No  |
|            |                          |                                      |                        |  |                          |                 |                                    | ☐ Yes  |
| 3.         |                          | enses include                        | _                      | No   |                          |                 |                                    | <b>—</b> 163   |
|            |                          | f people other th<br>d your depender | nan <sub>—</sub>       | Yes  |                          |                 |                                    |  |
| exp        | imate your ex            |                                      | our bankr              | uptcy filing date unles                            |                          |                 |                                    | pter 13 case to report<br>f the form and fill in the |
|            |                          |                                      |                        | government assistand                               |                          |                 |                                    |  |
|            | ficial Form 10           |                                      | a nave in              | nadea it on ocheane                                | i. Tour moonie           |                 | Your expe                          | enses  |
| 4.         |                          | r home ownersh<br>d any rent for the |                        | nses for your residence<br>or lot.                 | e. Include first mortgag | e<br>4. \$      |                                    | 1,800.00   |
|            | If not includ            | ed in line 4:                        |                        |  |                          |                 |                                    |  |
|            | 4a. Real e               | state taxes                          |                        |  |                          | 4a. \$          |                                    | 0.00   |
|            | •                        | rty, homeowner's                     |                        |  |                          | 4b. \$          |                                    | 50.00  |
|            |                          |                                      |                        | upkeep expenses                                    |                          | 4c. \$          |                                    | 0.00   |
| 5.         |                          | owner's associati                    |                        | dominium dues<br><b>our residence</b> , such as    | home equity loops        | 4d. \$<br>5. \$ |                                    | 0.00<br>0.00   |
| J.         | Auditioliai              |                                      | anco iui yi            | our residence, such as                             | HOTHE EQUITY IDAILS      | J. Þ            |                                    | 0.00   |

| ebtor 1               | Dane William Johnson   |                | Case number (if known) |                     |  |  |
|-----------------------|--|----------------|------------------------|---------------------|--|--|
| Utili                 | tioe:  |                |                        |                     |  |  |
| . <b>Utili</b><br>6a. | Electricity, heat, natural gas   | 6a.            | \$                     | 300.00              |  |  |
| 6b.                   | Water, sewer, garbage collection   | 6b.            | ·                      | 100.00              |  |  |
| 6c.                   | Telephone, cell phone, Internet, satellite, and cable services   | 6c.            | ·                      | 280.00              |  |  |
| 6d.                   | Other. Specify:  | 6d.            | ·                      | 0.00                |  |  |
|                       | d and housekeeping supplies  | ou. 7.         | \$                     |                     |  |  |
|                       | , , ,  |                | ·                      | 1,200.00            |  |  |
|                       | dcare and children's education costs   | 8.             | \$                     | 0.00                |  |  |
|                       | hing, laundry, and dry cleaning  | 9.             | \$                     | 50.00               |  |  |
|                       | sonal care products and services   | 10.            | \$                     | 50.00               |  |  |
|                       | ical and dental expenses   | 11.            | \$                     | 6.00                |  |  |
|                       | asportation. Include gas, maintenance, bus or train fare.  | 12.            | \$                     | 300.00              |  |  |
|                       | not include car payments.  Prtainment, clubs, recreation, newspapers, magazines, and books   | 13.            |                        |                     |  |  |
|                       |  |                | ·                      | 0.00                |  |  |
|                       | ritable contributions and religious donations  | 14.            | Φ                      | 50.00               |  |  |
|                       | rance. not include insurance deducted from your pay or included in lines 4 or 20.  |                |                        |                     |  |  |
|                       | Life insurance   | 15a.           | \$                     | 0.00                |  |  |
|                       | Health insurance   | 15b.           | · ·                    | 0.00                |  |  |
|                       | Vehicle insurance  | 15c.           | ·                      | 300.00              |  |  |
|                       |  | 15d.           | ·                      |                     |  |  |
|                       | Other insurance. Specify:  | 150.           | Φ                      | 0.00                |  |  |
| . Taxo<br>Spe         | es. Do not include taxes deducted from your pay or included in lines 4 or 20.  | 16.            | \$                     | 0.00                |  |  |
| •                     | allment or lease payments:   |                | Ψ                      | 0.00                |  |  |
|                       | Car payments for Vehicle 1   | 17a.           | \$                     | 856.00              |  |  |
|                       | Car payments for Vehicle 2   | 17a.           | \$                     | 500.00              |  |  |
|                       | • •  | 17b.           | ·                      |                     |  |  |
|                       | Other. Specify:  |                | ·                      | 0.00                |  |  |
|                       | Other. Specify:  | 17d.           | Ф                      | 0.00                |  |  |
|                       | r payments of alimony, maintenance, and support that you did not report a<br>ucted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I |                | \$                     | 0.00                |  |  |
|                       | er payments you make to support others who do not live with you.   | <i>,</i> .     | \$                     | 0.00                |  |  |
| Spe                   |  | 19.            | Ψ                      | 0.00                |  |  |
| •                     | er real property expenses not included in lines 4 or 5 of this form or on Sc.  |                | ur Income              |                     |  |  |
|                       | Mortgages on other property  | 20a.           |                        | 0.00                |  |  |
|                       | Real estate taxes  | 20b.           | ·                      | 0.00                |  |  |
|                       | Property, homeowner's, or renter's insurance   | 20c.           | ·                      | 0.00                |  |  |
|                       | Maintenance, repair, and upkeep expenses   | 20d.           |                        | 0.00                |  |  |
|                       | Homeowner's association or condominium dues  | 20a.<br>20e.   |                        |                     |  |  |
|                       |  |                |                        | 0.00                |  |  |
| . Oth                 | er: Specify:   | 21.            | +\$                    | 0.00                |  |  |
| . Calc                | culate your monthly expenses   |                |                        |                     |  |  |
| 22a.                  | Add lines 4 through 21.  |                | \$                     | 5,842.00            |  |  |
| 22b.                  | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  | 2              | \$                     |                     |  |  |
|                       | Add line 22a and 22b. The result is your monthly expenses.   |                | \$                     | 5,842.00            |  |  |
| 220.                  | The mile 224 and 225. The result is your monthly expenses.   |                | Ψ                      | 3,042.00            |  |  |
| Calc                  | culate your monthly net income.  |                |                        |                     |  |  |
| 23a.                  | Copy line 12 (your combined monthly income) from Schedule I.   | 23a.           | \$                     | 4,748.00            |  |  |
| 23b.                  | Copy your monthly expenses from line 22c above.  | 23b.           | -\$                    | 5,842.00            |  |  |
|                       | • •  |                |                        | -,                  |  |  |
| 23c.                  | Subtract your monthly expenses from your monthly income.   |                |                        | 4 00 4 00           |  |  |
|                       | The result is your monthly net income.   | 23c.           | \$                     | -1,094.00           |  |  |
|                       |  |                |                        |                     |  |  |
|                       | ou expect an increase or decrease in your expenses within the year after   |                |                        |                     |  |  |
|                       | example, do you expect to finish paying for your car loan within the year or do you expect your fication to the torms of your mortgage?                        | our mortgage p | payment to increase    | or decrease because |  |  |
|                       | fication to the terms of your mortgage?  |                |                        |                     |  |  |
|                       |  |                |                        |                     |  |  |
| Пγ                    | es Explain here:   |                |                        |                     |  |  |

| Fill in this info               | ormation to identify your o                            | ase:                     |                             |                         |  |
|---------------------------------|--|--------------------------|-----------------------------|-------------------------|--|
| Debtor 1                        | Dane William Joh                                       | nson                     |                             |                         |  |
|                                 | First Name   | Middle Name              | Last Name                   |                         |  |
| Debtor 2<br>(Spouse if, filing) | First Name   | Middle Name              | Last Name                   |                         |  |
| United States E                 | Bankruptcy Court for the:                              | EASTERN DISTRICT OF      | F CALIFORNIA                |                         |  |
| Case number                     |  |                          |                             |                         | Check if this is an  |
| (ii kilowii)                    |  |                          |                             |                         | Check if this is an amended filing                                   |
| You must file th                |  | e bankruptcy schedules   | or amended schedules. M     | Making a false stateme  | ent, concealing property, or<br>or imprisonment for up to 20         |
|                                 | 18 U.S.C. §§ 152, 1341, 1                              |                          | ruptey case can result in   | mics up to \$250,000, t | or imprisonment for up to 20   |
| Si                              | gn Below   |                          |                             |                         |  |
| Did you p                       | pay or agree to pay some                               | one who is NOT an attorr | ney to help you fill out ba | nkruptcy forms?         |  |
| ■ No                            |  |                          |                             |                         |  |
| ☐ Yes.                          | Name of person   |                          |                             |                         | otcy Petition Preparer's Notice,<br>ad Signature (Official Form 119) |
|                                 | nalty of perjury, I declare t<br>are true and correct. | hat I have read the sumn | nary and schedules filed    | with this declaration a | and  |
| X /s/ Da                        | ane William Johnson                                    |                          | X                           |                         |  |
|                                 | William Johnson<br>ture of Debtor 1                    |                          | Signature of D              | ebtor 2                 |  |
| Date                            | 7/26/2021  |                          | Date                        |                         |  |

| Eill        | in this inform      | nation to identify you                     | r 00001   |   |  |   |
|-------------|---------------------|--|---|---|--|---|
|             |                     |  |   |   |  |   |
| Deb         | tor 1               | Dane William Jo                            | hnson<br>Middle Name  | Last Name   |  |   |
| Deb         | tor 2               |  |   |   |  |   |
| (Spo        | use if, filing)     | First Name                                 | Middle Name   | Last Name   |  |   |
| Unit        | ed States Bar       | nkruptcy Court for the:                    | EASTERN DISTRICT OF   | CALIFORNIA  |  |   |
| Cas         | e number            |  |   |   |  |   |
| (if kno     | own)                |  | _   |   | _  | Check if this is an<br>amended filing                 |
| <b>○</b> (1 |                     | 407  |   |   |  |   |
|             | icial Fo            |  | Accelus con los diseits   | landa Ellina Can D                                    |  |   |
| Sta         | atement             | of Financial                               | Affairs for Individ   | duals Filing for B                                    | ankruptcy  | 4/19  |
|             |                     |  |   |   | equally responsible for sup<br>additional pages, write you |   |
|             |                     | i). Answer every que                       |   |   | y additional pages, in its ye                              | ar name and eace                                      |
| Pari        | Give D              | etails About Your Ma                       | arital Status and Where You   | Lived Before  |  |   |
| 1.          | What is your        | current marital statu                      | ıs?   |   |  |   |
|             | <b>.</b>            |  |   |   |  |   |
|             | ■ Married □ Not mar | ried                                       |   |   |  |   |
| 2.          | During the la       | ast 3 years, have you                      | lived anywhere other than   | where you live now?                                   |  |   |
|             | ■ No                |  |   |   |  |   |
|             | _                   | t all of the places you I                  | ived in the last 3 years. Do no   | ot include where you live now                         | <i>'</i> .   |   |
|             | Debtor 1 Pri        | ior Address:                               | Dates Debtor 1 lived there  | Debtor 2 Prior Ad                                     | dress:   | Dates Debtor 2<br>lived there                         |
| 3.          | Within the la       | st 8 vears, did vou ev                     | ver live with a spouse or led   | ıal equivalent in a commun                            | ity property state or territor                             | <b>v?</b> (Community property                         |
|             |                     |  |   |   | co, Texas, Washington and V                                |   |
|             | ■ No                |  |   |   |  |   |
|             | _                   | ke sure you fill out Scl                   | nedule H: Your Codebtors (Of  | ficial Form 106H).                                    |  |   |
| D           | o Familia           |  |   |   |  |   |
| Part        | Explain             | n the Sources of You                       | r income  |   |  |   |
|             | Fill in the tota    | I amount of income yo                      | nployment or from operating u received from all jobs and a have income that you receive | all businesses, including part-                       |  | ndar years?   |
|             | □ No                |  |   |   |  |   |
|             |                     | in the details.                            |   |   |  |   |
|             | - 163.1111          | in the details.                            |   |   |  |   |
|             |                     |  | Debtor 1  |   | Debtor 2   |   |
|             |                     |  | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply.                 | Gross income<br>(before deductions<br>and exclusions) |
|             |                     | of current year until<br>d for bankruptcy: | ■ Wages, commissions, bonuses, tips   | \$0.00  | ☐ Wages, commissions, bonuses, tips                        |   |
|             |                     |  | ☐ Operating a business  |   | ☐ Operating a business                                     |   |

| Debtor 1 _E                   | ane William Johns                                | son   | e number (if known)  |  |   |  |
|-------------------------------|--|---|--|--|---|--|
|                               |  |   |  |  |   |  |
|                               |  | Debtor 1  |  | Debtor 2                                   |   |  |
|                               |  | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions and<br>exclusions)            | Sources of income<br>Check all that apply. | Gross income<br>(before deductions<br>and exclusions) |  |
| For last cale<br>(January 1 t | endar year:<br>o December 31, 2020               | ☐ Wages, commissions, bonuses, tips   | \$4,558.00   | ☐ Wages, commissions, bonuses, tips        |   |  |
|                               |  | Operating a business  |  | ☐ Operating a business                     |   |  |
|                               | ndar year before that<br>o December 31, 2019     |   | \$11,282.00  | ☐ Wages, commissions, bonuses, tips        |   |  |
|                               |  | ☐ Operating a business  |  | ☐ Operating a business                     |   |  |
| □ No                          | n source and the gross                           | income from each source separa  | ately. Do not include income t                                   | ,  |   |  |
|                               |  | Debtor 1 Sources of income Describe below.  | Gross income from each source (before deductions and exclusions) | Describe below.                            | Gross income<br>(before deductions<br>and exclusions) |  |
|                               | ry 1 of current year u<br>ı filed for bankruptcy |   | \$3,535.00   |  |   |  |
|                               |  | unemployment  | \$19,152.00  | unemployment                               | \$28,571.43   |  |
| For last cale<br>(January 1 t | endar year:<br>o December 31, 2020               | Tax Refund  | \$7,202.00   |  |   |  |
|                               |  | unemployment  | \$25,794.00  |  |   |  |
| Part 3: Li                    | st Certain Payments                              | You Made Before You Filed for   | Rankruntov   |  |   |  |
|                               | er Debtor 1's or Debt<br>Neither Debtor 1 n      | or 2's debts primarily consume<br>nor Debtor 2 has primarily consi<br>for a personal, family, or househo      | r debts?<br>umer debts. Consumer debt                            | s are defined in 11 U.S.C. §               | 101(8) as "incurred by an                             |  |
|                               | <b>–</b> ~ <i>′</i>                              | before you filed for bankruptcy, d  | id you pay any creditor a tota                                   | I of \$6,825* or more?                     |   |  |
|                               | □ No. Go to li                                   |   |  |  |   |  |
|                               | paid the<br>not incl                             | low each creditor to whom you pa<br>at creditor. Do not include payment<br>lude payments to an attorney for t | nts for domestic support oblig<br>his bankruptcy case.           | ations, such as child suppor               | rt and alimony. Also, do                              |  |
| ■ Yes                         | , ,  | ment on 4/01/22 and every 3 year r 2 or both have primarily consi   |  | or after the date of adjustme              | 511L.   |  |
|                               |  | before you filed for bankruptcy, d  |  | I of \$600 or more?                        |   |  |
|                               | ■ No. Go to li                                   | ine 7.  |  |  |   |  |
|                               | include  | low each creditor to whom you page payments for domestic support only for this bankruptcy case.               |  |  |   |  |

| De  | Dane William Johnson  |  | Cas  | se number (# known)                        |                                  |  |
|-----|---|--|--|--|----------------------------------|--|
|     |   |  |  |  |                                  |  |
|     | Creditor's Name and Address   | Dates of payment   | Total amount paid                                  | Amount you still owe                       | Was this pa                      | yment for  |
| 7.  | Within 1 year before you filed for bankrup <i>Insiders</i> include your relatives; any general pof which you are an officer, director, person a business you operate as a sole proprietor. alimony. | partners; relatives of any ger<br>in control, or owner of 20% of | neral partners; partner<br>or more of their voting | erships of which yo<br>g securities; and a | ou are a genera<br>ny managing a | I partner; corporation<br>gent, including one fo |
|     | <ul><li>■ No</li><li>□ Yes. List all payments to an insider.</li></ul>  |  |  |  |                                  |  |
|     | Insider's Name and Address  | Dates of payment   | Total amount paid                                  | Amount you still owe                       | Reason for                       | this payment                                     |
| 3.  | Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co  |  | ments or transfer a                                | any property on a                          | eccount of a de                  | ebt that benefited an                            |
|     | <ul><li>No</li><li>☐ Yes. List all payments to an insider</li></ul>   |  |  |  |                                  |  |
|     | Insider's Name and Address  | Dates of payment   | Total amount paid                                  | Amount you still owe                       | Reason for<br>Include cred       | this payment                                     |
| Po  | rt 4: Identify Legal Actions, Repossession  | one and Faraglacures   | para   |  |                                  |  |
|     | modifications, and contract disputes.  ■ No □ Yes. Fill in the details.  Case title   | Nature of the case   | Court or agency                                    |  | Status of th                     | o caso   |
|     | Case number   | Nature of the case   | Court of agency                                    |  | Status of th                     | e case   |
| 10. | Within 1 year before you filed for bankrup Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.  |  | erty repossessed, f                                | oreclosed, garni                           | shed, attached                   | , seized, or levied?                             |
|     | Creditor Name and Address   | Describe the Property  Explain what happened                     | d  | Date                                       |                                  | Value of the<br>property                         |
| 11. | Within 90 days before you filed for bankru accounts or refuse to make a payment be  |  | luding a bank or fir                               | nancial institution                        | n, set off any a                 | mounts from your                                 |
|     | ■ No □ Yes. Fill in the details.  | •  |  |  |                                  |  |
|     | Creditor Name and Address   | Describe the action the  | e creditor took                                    | Date<br>take                               | action was                       | Amount   |
| 12. | Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or  |  | erty in the possess                                | ion of an assigne                          | ee for the bene                  | fit of creditors, a                              |
|     | No  |  |  |  |                                  |  |
|     | ☐ Yes   |  |  |  |                                  |  |
|     |   |  |  |  |                                  |  |

| Deb | otor 1              | Dane William Johnson   |           | Case number  | (if known)                              |                           |
|-----|---------------------|--|-----------|--|---|---------------------------|
|     |                     |  |           |  |   |                           |
| Par | t 5:                | List Certain Gifts and Contribution  | s         |  |   |                           |
| 13. | <b>=</b> 1          | n 2 years before you filed for bankro<br>No<br>Yes. Fill in the details for each gift.   | uptcy, d  | lid you give any gifts with a total value of more t  | han \$600 per person <sup>•</sup>       | ?                         |
|     | Gifts               | s with a total value of more than \$60 person  | 0         | Describe the gifts   | Dates you gave the gifts                | Value                     |
|     |                     | on to Whom You Gave the Gift and ress:   |           |  |   |                           |
| 14. | <b>I</b>            | No   |           | lid you give any gifts or contributions with a tota  | al value of more than                   | \$600 to any charity?     |
|     |                     | Yes. Fill in the details for each gift or co   |           |  |   |                           |
|     | more<br>Char        | s or contributions to charities that to<br>e than \$600<br>rity's Name<br>ress (Number, Street, City, State and ZIP Code                 |           | Describe what you contributed  | Dates you contributed                   | Value                     |
| Par | t 6:                | List Certain Losses  |           |  |   |                           |
| 15. |                     | n 1 year before you filed for bankru<br>mbling?  | ptcy or   | since you filed for bankruptcy, did you lose any   | thing because of the                    | t, fire, other disaster   |
|     |                     | No<br>Yes. Fill in the details.  |           |  |   |                           |
|     |                     | cribe the property you lost and the loss occurred  | Include   | be any insurance coverage for the loss the amount that insurance has paid. List pending ace claims on line 33 of Schedule A/B: Property. | Date of your loss                       | Value of property<br>lost |
| Par | t 7:                | List Certain Payments or Transfers   | <b>.</b>  |  |   |                           |
| 16. | cons                | ulted about seeking bankruptcy or p  | reparin   | d you or anyone else acting on your behalf pay on a bankruptcy petition?  s, or credit counseling agencies for services require          |   | rty to anyone you         |
|     |                     | No   |           |  |   |                           |
|     |                     | Yes. Fill in the details.  |           |  |   |                           |
|     | Addı<br>Ema         | il or website address  |           | Description and value of any property transferred  | Date payment<br>or transfer was<br>made | Amount of payment         |
|     | Pete<br>Law<br>7230 | on Who Made the Payment, if Not Yer G. Macaluso<br>Offices Of Peter G. Macaluso<br>O South Land Park Dr., Ste. 127<br>Dramento, CA 95831 | ou        |  | 6/2/21                                  | \$1,500.00                |
| 17. | prom                | ised to help you deal with your cred   | litors o  | d you or anyone else acting on your behalf pay or to make payments to your creditors?  | or transfer any prope                   | rty to anyone who         |
|     | Do no               | ot include any payment or transfer that  | you liste | ed on line 16.   |   |                           |
|     | _                   | No<br>Yes. Fill in the details.  |           |  |   |                           |
|     | Pers<br>Addi        | on Who Was Paid<br>ress  |           | Description and value of any property transferred  | Date payment or transfer was made       | Amount of payment         |
|     |                     |  |           |  |   |                           |

Debtor 1 Dane William Johnson

Case number (if known)

| 18. | B. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes Fill in the details |   |                               |                       |   |   |  |  |
|-----|---|---|-------------------------------|-----------------------|---|---|--|--|
|     | ☐ Yes. Fill in the details.  Person Who Received Transfer Address  Person's relationship to you   | Description and v property transferr                                |                               | paymer                | e any property or<br>its received or debts<br>exchange        | Date transfer was made                        |  |  |
| 19. | <ul> <li>Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device beneficiary? (These are often called asset-protection devices.)</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>   |   |                               |                       |   |   |  |  |
|     | Name of trust   | Description and v   | alue of the prop              | erty transfe          | erred   | Date Transfer was made                        |  |  |
| Par | t 8: List of Certain Financial Accounts, Inst   | ruments, Safe Deposit   | Boxes, and Sto                | rage Units            |   |   |  |  |
| 20. | Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ ■ No □ Yes. Fill in the details.  | other financial accour  | nts; certificates             | of deposit;           | , ,   | , ,   |  |  |
|     |   | Last 4 digits of account number                                     | Type of account or instrument |                       | Date account was<br>closed, sold,<br>moved, or<br>transferred | Last balance<br>before closing or<br>transfer |  |  |
| 21. | Oo you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, eash, or other valuables?  |   |                               |                       |   |   |  |  |
|     | ■ No □ Yes. Fill in the details.  |   |                               |                       |   |   |  |  |
|     | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)   | Who else had acc<br>Address (Number, State and ZIP Code)            |                               | Describe the contents |   | Do you still have it?                         |  |  |
| 22. | Have you stored property in a storage unit or   | place other than your   | home within 1 y               | year before           | you filed for bankrupto                                       | y?  |  |  |
|     | ■ No □ Yes. Fill in the details.  |   |                               |                       |   |   |  |  |
|     | Name of Storage Facility Address (Number, Street, City, State and ZIP Code)   | Who else has or h<br>to it?<br>Address (Number, State and ZIP Code) |                               | Describe th           | e contents  | Do you still have it?                         |  |  |
| Par | t 9: Identify Property You Hold or Control for  | or Someone Else   |                               |                       |   |   |  |  |
| 23. | Do you hold or control any property that som for someone.  No Yes. Fill in the details.   | neone else owns? Inclu  | ude any property              | y you borro           | wed from, are storing fo                                      | or, or hold in trust                          |  |  |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)  | Where is the prop<br>(Number, Street, City, S<br>Code)              |                               | Describe th           | e property  | Value   |  |  |
| Par | t 10: Give Details About Environmental Infor  | ,   |                               |                       |   |   |  |  |

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

regulations controlling the cleanup of these substances, wastes, or material.

Debtor 1 Dane William Johnson

Case number (if known)

|                                  | Site means any location, facility, or property<br>to own, operate, or utilize it, including dispo |  | v, whether you now own, operate, o                                     | or utilize it or used |  |  |  |  |
|----------------------------------|---|--|--|-----------------------|--|--|--|--|
|                                  |   |  |  |                       |  |  |  |  |
| Rep                              | ort all notices, releases, and proceedings tha  | nt you know about, regardless of when the                                  | hey occurred.  |                       |  |  |  |  |
| 24.                              | Has any governmental unit notified you that   | you may be liable or potentially liable un                                 | nder or in violation of an environme                                   | ental law?            |  |  |  |  |
| ■ No □ Yes. Fill in the details. |   |  |  |                       |  |  |  |  |
|                                  | Name of site<br>Address (Number, Street, City, State and ZIP Code)                                | Governmental unit Address (Number, Street, City, State and ZIP Code)       | Environmental law, if you know it                                      | Date of notice        |  |  |  |  |
| 25.                              | Have you notified any governmental unit of a  | any release of hazardous material?   |  |                       |  |  |  |  |
|                                  | ■ No □ Yes. Fill in the details.  |  |  |                       |  |  |  |  |
|                                  | Name of site<br>Address (Number, Street, City, State and ZIP Code)                                | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | Environmental law, if you know it                                      | Date of notice        |  |  |  |  |
| 26.                              | Have you been a party in any judicial or adm  ■ No □ Yes. Fill in the details.                    | ninistrative proceeding under any enviro                                   | nmental law? Include settlements a                                     | and orders.           |  |  |  |  |
|                                  | Case Title Case Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code)    | lature of the case   | Status of the case    |  |  |  |  |
| Par                              | 111: Give Details About Your Business or C  | Connections to Any Business  |  |                       |  |  |  |  |
| 27.                              | Within 4 years before you filed for bankrupto   | cy, did you own a business or have any                                     | of the following connections to any                                    | y business?           |  |  |  |  |
|                                  | ☐ A sole proprietor or self-employed in   | n a trade, profession, or other activity, ei                               | ther full-time or part-time  |                       |  |  |  |  |
|                                  | ☐ A member of a limited liability comp  | any (LLC) or limited liability partnership                                 | (LLP)  |                       |  |  |  |  |
|                                  | ☐ A partner in a partnership  |  |  |                       |  |  |  |  |
|                                  | ☐ An officer, director, or managing exe   | ecutive of a corporation   |  |                       |  |  |  |  |
|                                  | ☐ An owner of at least 5% of the voting   | or equity securities of a corporation                                      |  |                       |  |  |  |  |
|                                  | ■ No. None of the above applies. Go to P  | art 12.  |  |                       |  |  |  |  |
|                                  | Yes. Check all that apply above and fill  |  |  |                       |  |  |  |  |
|                                  | Business Name   | Describe the nature of the business  | Employer Identification number   | r                     |  |  |  |  |
|                                  | Address<br>(Number, Street, City, State and ZIP Code)   | Name of accountant or bookkeeper   | Do not include Social Security number or ITIN.  Dates business existed |                       |  |  |  |  |
| 28.                              | Within 2 years before you filed for bankrupto institutions, creditors, or other parties.          | cy, did you give a financial statement to                                  | anyone about your business? Inclu                                      | ude all financial     |  |  |  |  |
|                                  | ■ No □ Yes. Fill in the details below.  |  |  |                       |  |  |  |  |
|                                  | Name Address (Number, Street, City, State and ZIP Code)   |  |  |                       |  |  |  |  |
|                                  |   |  |  |                       |  |  |  |  |

Part 12: Sign Below

I have read the answers on this *Statement* of *Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

| Debtor             | 1 Dane William Johnson  | Case number (if known)   |                                   |
|--------------------|---|--|-----------------------------------|
| with a b           | e and correct. I understand that making a false s<br>pankruptcy case can result in fines up to \$250,00<br>C. §§ 152, 1341, 1519, and 3571. | tatement, concealing property, or obtaining money of<br>00, or imprisonment for up to 20 years, or both. | r property by fraud in connection |
| /s/ Da             | ne William Johnson  |  |                                   |
|                    | William Johnson<br>ure of Debtor 1  | Signature of Debtor 2  |                                   |
| Date               | 7/26/2021   | Date   |                                   |
| Did you ■ No □ Yes | attach additional pages to Your Statement of F  | inancial Affairs for Individuals Filing for Bankruptcy (   | Official Form 107)?               |
| Did you ■ No       | pay or agree to pay someone who is not an atte  | orney to help you fill out bankruptcy forms?   |                                   |
| ☐ Yes.             | Name of Person Attach the Bankruptcy Pe   | tition Preparer's Notice, Declaration, and Signature (Offic  | ial Form 119).                    |

| Fill in this infor              | mation to identify your case:   |   |  |
|---------------------------------|---|---|--|
| Debtor 1                        | Dane William Johnson  |   |  |
|                                 | First Name Middle N   | ame Last Name   |  |
| Debtor 2<br>(Spouse if, filing) | First Name Middle N   | ame Last Name   |  |
| United States Ba                | ankruptcy Court for the: EASTERN [  | DISTRICT OF CALIFORNIA  |  |
| Case number                     |   |   |  |
| (if known)                      |   | _   | ☐ Check if this is an amended filing                   |
| Official Fo                     | orm 109   |   |  |
|                                 |   | dividuals Filing Under Chapt  | ter 7 12/15  |
| _                               | lividual filing under chapter 7, you m                                    |   |  |
| you have least                  | sed personal property and the lease is form with the court within 30 days | has not expired.<br>after you file your bankruptcy petition or by the date :                          |  |
| on the                          |   | ds the time for cause. You must also send copies to t   | the creditors and lessors you list                     |
|                                 | eople are filing together in a joint cas<br>nd date the form.             | se, both are equally responsible for supplying correct  | information. Both debtors must                         |
|                                 | and accurate as possible. If more sp<br>our name and case number (if know | ace is needed, attach a separate sheet to this form. On).   | n the top of any additional pages,                     |
|                                 | our Creditors Who Have Secured Cla  |   |  |
| 1. For any credit               |   | Iule D: Creditors Who Have Claims Secured by Proper   | rty (Official Form 106D), fill in the                  |
|                                 | reditor and the property that is collatera                                | What do you intend to do with the property th secures a debt?   | at Did you claim the property as exempt on Schedule C? |
| _                               | Citizens Bank   | ☐ Surrender the property.   | □No  |
| name:                           |   | <ul><li>☐ Retain the property and redeem it.</li><li>■ Retain the property and enter into a</li></ul> | ■ Yes  |
| Description of                  | c c   | Reaffirmation Agreement.  |  |
| property<br>securing debt       | miles<br>good condition   | ☐ Retain the property and [explain]:  |  |
| Creditor's                      | Kia Motors Finance  | ☐ Surrender the property.   | □No  |
| name:                           |   | Retain the property and redeem it.  | <b>-</b> v   |
| Description of                  | f 2020 Kia Telluride  | ☐ Retain the property and enter into a  Reaffirmation Agreement                                       | ■ Yes  |

Part 2: List Your Unexpired Personal Property Leases

good condition

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Reaffirmation Agreement.

☐ Retain the property and [explain]:

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

property

securing debt:

| Debtor 1 Dane William Johnson  | Case number (if known) |
|--|------------------------|
| Lessor's name: Description of leased Property:   | □ No □ Yes             |
| Lessor's name: Description of leased Property:   | □ No □ Yes             |
| Lessor's name: Description of leased Property:   | □ No                   |
| Lessor's name: Description of leased Property:   | □ No                   |
| Lessor's name: Description of leased Property:   | □ No □ Yes             |
| Lessor's name: Description of leased Property:   | □ No □ Yes             |
| Lessor's name: Description of leased Property:   | □ No □ Yes             |
| Under penalty of perjury, I declare that I have indicated my intention aborproperty that is subject to an unexpired lease. |                        |
| X /s/ Dane William Johnson X  Dane William Johnson  Signature of Debtor 1  | Signature of Debtor 2  |
| Date <u>7/26/2021</u> D  | ate                    |

| Fill in this in                                | formation to identify your case:  |  |                                       |                           |                                  | irected in                   | this form and in                                      | Form                        |
|--|---|--|---------------------------------------|---------------------------|----------------------------------|------------------------------|---|-----------------------------|
| Debtor 1                                       | Dane William Johnson  |  | 12                                    | 2A-1Supp                  | :                                |                              |   |                             |
| Debtor 2<br>(Spouse, if filing                 | )   |  |                                       | ■ 1. The                  | re is no pres                    | umption o                    | f abuse   |                             |
|  | es Bankruptcy Court for the: Eastern District of  | California                                 |                                       | арр                       |                                  | nade unde                    | ne if a presump<br>er <i>Chapter 7 Me</i><br>122A-2). |                             |
| Case number (if known)                         | er  |  |                                       | ☐ 3. The                  | Means Test                       | does not                     | apply now beca  |                             |
|  |   |  |                                       | ☐ Chec                    | k if this is a                   | n amend                      | led filina  | <u>-</u>                    |
| Official                                       | Form 122A - 1   |  |                                       |                           |                                  |                              | J   |                             |
| Chapte   | er 7 Statement of Your Cur  | rent Mor                                   | nthly Inc                             | ome                       |                                  |                              |   | 04/20                       |
| attach a sepa<br>case number<br>qualifying mil | te and accurate as possible. If two married people a rate sheet to this form. Include the line number to w (if known). If you believe that you are exempted fror itary service, complete and file Statement of Exemp                          | hich the additior<br>n a presumption       | nal information of abuse becau        | applies. Or<br>ise you do | n the top of ai<br>not have prin | ny addition<br>narily cons   | nal pages, write y<br>sumer debts or b                | your name and<br>because of |
|  | Calculate Your Current Monthly Income   |  |                                       |                           |                                  |                              |   |                             |
|  | s your marital and filing status? Check one on  | ly.  |                                       |                           |                                  |                              |   |                             |
|  | married. Fill out Column A, lines 2-11.   | thath Oaksaa                               | A I D I'                              | 0.44                      |                                  |                              |   |                             |
| _  | ried and your spouse is filing with you. Fill ou  |  |                                       | 2-11.                     |                                  |                              |   |                             |
|  | ried and your spouse is NOT filing with you.  | •  | •                                     |                           |                                  |                              |   |                             |
| _  | iving in the same household and are not lega  | -  |                                       |                           |                                  |                              |   |                             |
| i  | .iving separately or are legally separated. Fill of<br>penalty of perjury that you and your spouse are lead<br>iving apart for reasons that do not include evading.   | egally separated                           | d under nonbar                        | nkruptcy la               | w that applie                    | es or that                   |   |                             |
| 101(10A).<br>the 6 mont                        | average monthly income that you received from all a For example, if you are filing on September 15, the 6-m hs, add the income for all 6 months and divide the total wn the same rental property, put the income from that p                  | onth period would<br>by 6. Fill in the res | be March 1 thro<br>sult. Do not inclu | ugh August<br>de any inco | 31. If the amo                   | ount of your<br>ore than or  | monthly income nce. For example,                      | varied during<br>if both    |
|  |   |  |                                       | Column Debtor 1           |                                  | Column<br>Debtor<br>non-fili |   |                             |
|  | ross wages, salary, tips, bonuses, overtime, deductions).   | and commissio                              | ons (before all                       | \$                        | 0.00                             | \$                           | 0.00  |                             |
|  | ny and maintenance payments. Do not include n B is filled in.   | payments from                              | a spouse if                           | \$                        | 0.00                             | \$                           | 0.00  |                             |
| of you<br>from a<br>and ro                     | ounts from any source which are regularly pa<br>or your dependents, including child support.<br>In unmarried partner, members of your household<br>ommates. Include regular contributions from a sp<br>Include payments you listed on line 3. | Include regular, your depender             | contributions<br>nts, parents,        | \$                        | 0.00                             | \$                           | 0.00  |                             |
| 5. Net inc                                     | come from operating a business, profession,   |  |                                       |                           |                                  |                              |   |                             |
|  |   | \$ 0.00                                    | otor 1                                |                           |                                  |                              |   |                             |
|  | receipts (before all deductions)  | -\$ 0.00                                   |                                       |                           |                                  |                              |   |                             |
|  | ry and necessary operating expenses onthly income from a business, profession, or farr  |  | Copy here ->                          | • \$                      | 0.00                             | \$                           | 0.00  |                             |
|  | come from rental and other real property  |  | .,                                    | · ——                      |                                  |                              |   |                             |
| <b>0.</b>                                      | ,   | Deb  | otor 1                                |                           |                                  |                              |   |                             |
| Gross  | receipts (before all deductions)  | \$0.00                                     |                                       |                           |                                  |                              |   |                             |
| Ordina   | ry and necessary operating expenses   | -\$ 0.00                                   |                                       |                           |                                  | _                            |   |                             |
| Net mo   | onthly income from rental or other real property  | \$   | Copy here ->                          | •\$                       | 0.00                             | \$                           | 0.00  |                             |
| 7. Interes                                     | st, dividends, and royalties  |  |                                       | \$                        | 0.00                             | \$                           | 0.00  |                             |

| Debto | Dane William Johnson   |   |  | Case number       | r (if known)  |                           |                   |          |
|-------|--|---|--|-------------------|---------------|---------------------------|-------------------|----------|
|       |  |   |  | Column A Debtor 1 |               | Column Debtor 2 non-filir |                   |          |
| 8.    | Unemployment compensation  |   |  | \$                | 0.00          | \$                        | 0.00              |          |
|       | Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:   | received was a benefi   | it under                                   |                   |               |                           |                   |          |
|       | For you \$   | 2,748.0   | 00_  |                   |               |                           |                   |          |
|       | For your spouse \$   | 2,000.0   | 00   |                   |               |                           |                   |          |
|       | Pension or retirement income. Do not include any ambenefit under the Social Security Act. Also, except as st not include any compensation, pension, pay, annuity, o United States Government in connection with a disabilit disability, or death of a member of the uniformed service pay paid under chapter 61 of title 10, then include that process to the exceed the amount of retired pay to which you if retired under any provision of title 10 other than chapt  | tated in the next senter<br>r allowance paid by the<br>cy, combat-related injur<br>es. If you received any<br>pay only to the extent the<br>would otherwise be en       | nce, do<br>e<br>ry or<br>retired<br>hat it | \$                | 0.00          | \$                        | 0.00              |          |
|       | Income from all other sources not listed above. Spe Do not include any benefits received under the Social Sunder the Federal law relating to the national emergency under the National Emergencies Act (50 U.S.C. 1601 et coronavirus disease 2019 (COVID-19); payments receiverime, a crime against humanity, or international or domotompensation pension, pay, annuity, or allowance paid Government in connection with a disability, combat-related the formal page and put the total below  | Security Act; payments by declared by the Preset seq.) with respect to the vedical as a victim of a water terrorism; or the United States at the display or disability, | made<br>sident<br>he<br>ir<br>or           |                   |               |                           |                   |          |
|       | •  |   |  | \$                | 0.00          | \$                        | 0.00              |          |
|       |  |   |  | \$                | 0.00          | \$                        | 0.00              |          |
|       | Total amounts from separate pages, if any.   |   | +  | \$                | 0.00          | \$                        | 0.00              |          |
|       | Calculate your total current monthly income. Add line each column. Then add the total for Column A to the Column A t |   | \$   | 0.00              | +             | 0.00                      | _   [ ` —         | 0.00     |
| Part  | 2: Determine Whether the Means Test Applies to   | o You   |  |                   |               |                           | income            |          |
| 12.   | Calculate your current monthly income for the year.  | . Follow these steps:   |  |                   |               |                           |                   |          |
|       | 12a. Copy your total current monthly income from line 1  | •   |  | Con               | y line 11 l   | oro->                     | \$                | 0.00     |
|       | 12a. Copy your total current monthly income from line 1  |   |  | СОР               | y iiiie i i i | 1616->                    | φ                 | 0.00     |
|       | Multiply by 12 (the number of months in a year)  |   |  |                   |               |                           | <b>x</b> 1        | 2        |
|       | 12b. The result is your annual income for this part of the   | e form  |  |                   |               | 1                         | 12b. \$           | 0.00     |
| 13.   | Calculate the median family income that applies to   | you. Follow these step  | s:   |                   |               |                           |                   |          |
|       | Fill in the state in which you live.   | CA  |  |                   |               |                           |                   |          |
|       | Fill in the number of people in your household.  | 4   |  |                   |               |                           |                   |          |
|       | Fill in the median family income for your state and size of To find a list of applicable median income amounts, go for this form. This list may also be available at the bank  | online using the link sp  | pecified i                                 | n the separa      | ate instruc   |                           | 13. \\$ <b>10</b> | 6,530.00 |
| 14.   | How do the lines compare?  |   |  |                   |               |                           |                   |          |
|       | 14a. Line 12b is less than or equal to line 13. Or Go to Part 3. Do NOT fill out or file Official  |   | eck box                                    | 1, There is i     | no presum     | ption of al               | buse.             |          |
|       | 14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2.   |   | The pre                                    | sumption of       | abuse is      | determined                | d by Form 12      | 2A-2.    |
| Part  |  |   |  |                   |               |                           |                   |          |
|       | By signing here, I declare under penalty of perjury  | that the information or   | n this sta                                 | tement and        | in any atta   | achments i                | is true and co    | rrect.   |
|       | X /s/ Dane William Johnson   |   |  |                   |               |                           |                   |          |
|       | Dane William Johnson   |   |  |                   |               |                           |                   |          |

| Debtor 1 | Dane William Johnson   | Case number (if known) |  |
|----------|--|------------------------|--|
|          | Signature of Debtor 1  |                        |  |
| D        | ate 7/26/2021<br>MM / DD / YYYY  |                        |  |
|          | If you checked line 14a, do NOT fill out or file Form 122A-2.            |                        |  |
|          | If you checked line 14b, fill out Form 122A-2 and file it with this form | ı <b>.</b>             |  |

| Debtor 1 | Dane William Johnson | Case number (if known) |
|----------|----------------------|------------------------|
|----------|----------------------|------------------------|

### **Current Monthly Income Details for the Debtor**

### **Debtor Income Details:**

Income for the Period 01/01/2021 to 06/30/2021.

Line 8 ssa - Unemployment compensation (Non-CMI)

Source of Income: **unemployment** Constant income of **\$2,748.00** per month.

| Debtor 1 | Dane William Johnson | Case number (if known) |
|----------|----------------------|------------------------|
|----------|----------------------|------------------------|

### **Current Monthly Income Details for the Debtor's Spouse**

### **Spouse Income Details:**

Income for the Period 01/01/2021 to 06/30/2021.

**Line 8 ssa - Unemployment compensation (Non-CMI)** Source of Income: **unemployment** 

Constant income of \$2,000.00 per month.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |  |
|------------|--------------------|--|
| \$245      | filing fee         |  |
| \$78       | administrative fee |  |
| + \$15     | trustee surcharge  |  |
| \$338      | total fee          |  |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$78  | administrative fee |
|   | \$278 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$78  | administrative fee |
|   | \$313 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses">http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses</a>.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court** Eastern District of California

| In r | re Dane William Johnson  |  | Case No.   |  |    |  |
|------|--|--|--|--|----|--|
|      |  | Debtor(s)  | Chapter  | 7  |    |  |
|      | DISCLOSURE (   | F COMPENSATION OF ATTORNI  | EY FOR DE  | EBTOR(S)                                 |    |  |
| 1.   | compensation paid to me within one ye  | cursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to e rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:   |  |  |    |  |
|      | For legal services, I have agreed to   | accept   | \$   | 1,500.00                                 |    |  |
|      |  | have received  | \$   | 1,500.00                                 |    |  |
|      |  |  | \$   | 0.00                                     |    |  |
| 2.   | The source of the compensation paid to   | ne was:  |  |  |    |  |
|      | ■ Debtor □ Other (spec   | fy):   |  |  |    |  |
| 3.   | The source of compensation to be paid  | o me is:   |  |  |    |  |
|      | ■ Debtor □ Other (spec   | fy):   |  |  |    |  |
| 4.   | ■ I have not agreed to share the above   | ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.   |  |  |    |  |
|      | ☐ I have agreed to share the above-di copy of the agreement, together wi   | closed compensation with a person or persons who a a list of the names of the people sharing in the com  | are not members appensation is atta                          | or associates of my law firm. sched.     | A  |  |
| 5.   | In return for the above-disclosed fee, I   | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  |  |  |    |  |
|      | <ul> <li>b. Preparation and filing of any petitio</li> <li>c. Representation of the debtor at the r</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secure</li> <li>relief from stay actionspress</li> </ul> | ation, and rendering advice to the debtor in determine, schedules, statement of affairs and plan which may eeting of creditors and confirmation hearing, and an creditors to reduce to market value; exempting paration and filing of reaffirmation agreement of the confirmation ag | y be required; y adjourned hea tion planning; nts and applic | rings thereof; judicial lien avoidances, |    |  |
| 6.   |  | ove-disclosed fee does not include the following servors in any dischargeability actions, or any   |  | ry proceeding.                           |    |  |
|      |  | CERTIFICATION  |  |  |    |  |
| this | I certify that the foregoing is a complete bankruptcy proceeding.  | statement of any agreement or arrangement for paying   | ment to me for r   | epresentation of the debtor(s)           | in |  |
|      | 7/26/2021  | /s/ Peter G. Macaluso  | •  |  |    |  |
| _    | Date   | Peter G. Macaluso 21   |  |  |    |  |
|      |  | Signature of Attorney  Law Office of Peter G   | Macaluso   |  |    |  |
|      |  | 7230 South Land Par  |  |  |    |  |
|      |  | Sacramento, CA 9583  |  |  |    |  |
|      |  | 916-392-6591 Fax: 9<br>info@pmbankruptcy.  |  |  |    |  |

Name of law firm

Johnson, Dane - - Pg. 1 of 3

Experian PO Box 4500 Allen, TX 75013

Equifax Information Services, LLC PO Box 740256 Atlanta, GA 30374

TransUnion LLC Consumer Dispute Center PO Box 2000 Chester, PA 19016

America's Tire/Synchrony Car Care PO Box 960061 Orlando, FL 32896-0061

Capital One P.O. Box 60599 City of Industry, CA 91716-0599

Capital One Po Box 31293 Salt Lake City, UT 84131

Cardmember Service PO Box 6294 Carol Stream, IL 60197-6294

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

Citi/Sears Citibank/Centralized Bankruptcy Po Box 790034 St Louis, MO 63179

Citibank/The Home Depot Citicorp Credit Srvs/Centralized Bk dept Po Box 790034 St Louis, MO 63179 Johnson, Dane - - Pg. 2 of 3

Citizens Bank Attention: ROP-15B 1 Citizens Drive Riverside, RI 02940

Comenity Bank/Kay Jewelers Attn: Bankruptcy Po Box 182125 Columbus, OH 43218 Doc 1

Comenity/zlotlt Attn: Bankruptcy Po Box 182125 Columbus, OH 45318

Discover Financial Attn: Bankruptcy Po Box 3025 New Albany, OH 43054

Discover Personal Loans Attn: Bankruptcy Po Box 30954 Salt Lake City, UT 84130

Freedom Road Financial Attn: Bankruptcy Po Box 4597 Oak Brook, IL 60522

Home Depot Credit Services P.O. BOX 78011 Phoenix, AZ 85062-8011

Kay Jewelers PO Box 659728 San Antonio, TX 78265-9728

Kia Motors Finance 10550 Talbert Ave Fountain Valley, CA 92708

Olivie Hueleng 6116 Everest Way Sacramento, CA 95842

Doc 1

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Safe Credit Union 2295 Iron Point Road Suite 100 Folsom, CA 35630

Sears Credit Cards PO Box 78051 Phoenix, AZ 85062-8051

Security Credit Services Attn: Bankruptcy Po Box 1156 Oxford, MS 38655

Sewing and More/Synchrony Bank PO Box 960061 Orlando, FL 32896-0061

Syncb/ccamtr Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Lowes Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

US Bank/RMS Attn: Bankruptcy Po Box 5229 Cincinnati, OH 45201

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